

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D' ALENE-SPOKANE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number 95-11157

Date Received: 8/25/09

Receipt No: N-021867A

Received By: Kau

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Robert F. & Sandra V. Jones Phone (208) 687-1112

Mailing Address PO Box 258 Rathdrum ID ZIP 83858
Street or Box City State

2. Date of Priority (Only one (1) per claim) 4-14-82
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____

4. a. Location of Point of Diversion is: Township 52N, Range 5W, Section 25
SE, 1/4 of NE, 1/4 Govt. Lot _____, BM., County of Kootenai

Parcel (PIN) no. -2140

Additional points of diversion if any: _____

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed
and as enlarged and the depth of each well. _____

Submersible Pump - 177 feet deep
1 inch line to 7000 gallon reservoir

SCANNED

AUG 25 2009

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Domestic purposes from 1-1- to 12-31 amount 0.04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.04 (cfs) and/or (b) _____ (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) 2 households

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
<u>SW</u>	<u>SW</u>	<u>25</u>				<u>D</u>													

Parcel (PIN) no(s). - 2160

Total number of acres irrigated _____

10. In which county (ies) are lands listed above as place of use located? Kootenai

11. Do you own the property listed above as place of use? Yes (☒) No (☐)

If your answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

Water right number 95-949 or None (☐)

13. Remarks: _____

Last Name _____ Identification No. _____

SCANNED
AUG 25 2009



Well permit # 95-82-N-11

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I/We do () do not (☒) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Robert A. Jones Date: 6-15-09
Sandra V. Jones Date: 6-15-09

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

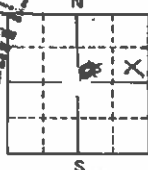
Last Name _____ Identification No. _____

RECEIVED
AUG 25 2009

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

98 NC

1. WELL OWNER Name <u>EARL HANSEN JAN HANSEN</u> Address <u>B+4 BOX 89 RATHDRUM IDA</u> Owner's Permit No. <u>95-82-N-11 83858</u>		7. WATER LEVEL Static water level <u>33</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____																																																																													
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____ Discharge G.P.M. <u>4.5</u> Pumping Level <u>170</u> Hours Pumped <u>2 hrs</u>																																																																													
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type) _____		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>6</td><td>0</td><td>8</td><td>TOP SOIL</td><td></td><td>X</td></tr><tr><td></td><td>8</td><td>9</td><td>" " WATER SEED</td><td>X</td><td></td></tr><tr><td></td><td>9</td><td>33</td><td>DECOMPOSED GRANITE</td><td></td><td>X</td></tr><tr><td></td><td>33</td><td>38</td><td>" " " SEED</td><td>X</td><td></td></tr><tr><td></td><td>38</td><td>61</td><td>FIRM " GRAY "</td><td></td><td>X</td></tr><tr><td></td><td>61</td><td>66</td><td>BROKEN " " 16" X</td><td>X</td><td></td></tr><tr><td></td><td>66</td><td>123</td><td>FIRM GRAY "</td><td></td><td>X</td></tr><tr><td></td><td>123</td><td>127</td><td>BROKEN " "</td><td></td><td>X</td></tr><tr><td></td><td>127</td><td>141</td><td>FIRM " "</td><td></td><td>X</td></tr><tr><td></td><td>146</td><td>157</td><td>BROKEN " " 3.5" X</td><td>X</td><td></td></tr><tr><td></td><td>157</td><td>177</td><td>FIRM MIXED COLORED GRANITE</td><td></td><td>X</td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	6	0	8	TOP SOIL		X		8	9	" " WATER SEED	X			9	33	DECOMPOSED GRANITE		X		33	38	" " " SEED	X			38	61	FIRM " GRAY "		X		61	66	BROKEN " " 16" X	X			66	123	FIRM GRAY "		X		123	127	BROKEN " "		X		127	141	FIRM " "		X		146	157	BROKEN " " 3.5" X	X			157	177	FIRM MIXED COLORED GRANITE		X
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		RECEIVED APR 27 1982 DEPARTMENT OF WATER RESOURCES DISTRICT OFFICE																																																																													
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>2.50</u> inches</td><td><u>6</u> inches</td><td><u>1</u> feet</td><td><u>39</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☐ Yes ☒ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☒ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☒ Torch Size of perforation <u>1/2</u> inches by <u>2</u> inches Number <u>20</u> perforations <u>39</u> feet <u>33</u> feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>25</u> Material used in seal: ☐ Cement grout ☒ Puddling clay ☒ Well cuttings Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port _____				Thickness	Diameter	From	To	<u>2.50</u> inches	<u>6</u> inches	<u>1</u> feet	<u>39</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet																																																								
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6. LOCATION OF WELL map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>SE 1/4 NE 1/4 Sec. 15, T. 52 N, R. 5 E.</u>		10. Work started <u>4-13-82</u> finished <u>4-14-82</u>																																																																													
		11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were compiled with at the time the rig was removed. Firm Name <u>BRAND X WATER WELLS</u> Firm No. <u>289</u> Address <u>RATHDRUM, IDA</u> Date <u>4-17-82</u> Signed by (Firm Official) <u>Landon Cordon</u> and (Operator) <u>Landon Cordon</u>																																																																													