

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 95-11254

Date Received: 7/20/2009

Receipt No: N021451

Received By: dm

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s) JUDITH V Schmand Phone (208) 765-2898
Mailing Address 5397 So State Rd Coeur d'Alene IDAHO Zip 83814-7957
Street or Box City State
2. Date of Priority: (Only one per claim) 10-7-1991
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water (✓) or Other (X) (a) WELL
which is tributary to (b) _____
4. Location of Point of Diversion is: Township 50N, Range 04W, Section 30
SE 1/4 of NE 1/4, or Govt. Lot — BM. County of KOOTENAI
Parcel (PIN) no. 50N04W-30-2800
Additional points of diversion if any: —
If available, GPS coordinates: —
5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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.
WELL TO Pressure TANK To OUTSIDE FAUCET + TO STOCK
WATERED
6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)
For Domestic purposes from JAN 1 to DEC 31 amount .04
For STOCK purposes from JAN 1 to DEC 31 amount .02
7. Total Quantity claimed 0.04 cfs (✓) or AFY ()
8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;
Stockwater and Number of livestock) 1 House - up to 14 STOCK

SCANNED

JUL 21 2009

9. Location of Place of Use is: Township 50 N, Range 04 W, Section 30,

SE 1/4 of NE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

If different than shown in Item 4

for (Check One) Domestic () Stock () Domestic and Stock (☒)

Additional places of use, if any NA

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 the 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.

Permit # 95-91-N-160 or None (☒)

13. Remarks:

Permit # 95-91-N-160 well drilled 10/3/1991 97'-102'

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: 2

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) Jessith Y. Schmand Date: 07/20/2009

Date: _____

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 _____

Address _____

Date _____

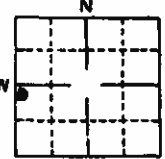
Last Name _____ Identification No. _____

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JUL 21 2009

WELL DRILLER'S REPORT

This report must be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

1. WELL OWNER Name <u>ROBERT SCHMIDT</u> Address <u>11638 S. 3800 ST. RD. COEUR D'ALENE</u> Drilling Permit No. <u>95-91-N-160</u> Water Right Permit No. _____		7. WATER LEVEL Static water level <u>12</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 _____ OF. Quality _____ Describe artesian or temperature zones below.																																									
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☒ Bailor ☐ Air ☐ Other _____ Discharge G.P.M. <u>7</u> Pumping Level <u>93</u> Hours Pumped <u>2</u>																																									
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG 079978 <table border="1"><thead><tr><th rowspan="2">Bore 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>8"</td><td>0</td><td>11'</td><td>CLAY & SILT</td><td></td><td>X</td></tr><tr><td>8"</td><td>11'</td><td>60'</td><td>DECOMPOSED GRANITE</td><td></td><td>X</td></tr><tr><td>6"</td><td>60'</td><td>64'</td><td>DECOMPOSED GRANITE</td><td>X</td><td></td></tr><tr><td>6"</td><td>64'</td><td>97'</td><td>DECOMPOSED GRANITE</td><td></td><td>X</td></tr><tr><td>6"</td><td>97'</td><td>102'</td><td>BROKEN GRANITE</td><td>X</td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8"	0	11'	CLAY & SILT		X	8"	11'	60'	DECOMPOSED GRANITE		X	6"	60'	64'	DECOMPOSED GRANITE	X		6"	64'	97'	DECOMPOSED GRANITE		X	6"	97'	102'	BROKEN GRANITE	X	
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____																																											
5. WELL CONSTRUCTION Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____ Thickness <u>2.50</u> inches Diameter <u>6</u> inches From <u>2</u> feet To <u>97</u> feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ 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>20'</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ 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 <u>6" WELL CAP</u>																																											
6. LOCATION OF WELL Sketch map location must agree with written location  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> N.W. 1/4 S.W. 1/4 Sec. <u>29</u> T. <u>50</u> N. R. <u>4</u> E. W. _____		11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>FLAVIN & FLAVIN</u> Firm No. <u>433</u> Address <u>PO Box 320 Rath Drury ID</u> Date <u>10/7/91</u> Signed by (Firm Official) <u>James H. Flavin</u> and (Operator) <u>James H. Flavin</u>																																									

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

SCHMAND PIN 50N04W-30-2800

X = WELL

• = WATER or SOY STOCK FROM WELL

