

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 95-11304Date Received: 6/5/19Receipt No: NO 20824Received By: RC

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 day1. Name of Claimant(s) Leigh O. AND Janice M. UFFER Phone (208) 687-2324Mailing Address 18872 N well Rd. Rathdrum Id. 83858
Street or Box City State Zip2. Date of Priority: (Only one per claim) 5-29-89 MARCH 14, 1983
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township S2N, Range 4 W., Section 24,
NE 1/4 of NW 1/4, or Govt. Lot — BM. County of Kootenai;Parcel (PIN) no. 52N 04W 24 7770Additional 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.

95-74-N-95 Well Drilled 1974
mobile Home water line Replaced 1988

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from 01-01 to 01-01 amount — cfs () or AFY ()For Domestic purposes from 01-01 to 12-31 amount .047. Total Quantity claimed .04 cfs (X) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) one Home

SCANNED

JUN - 8 2009

9. Location of Place of Use is: Township 52 N, Range 4 W, Section 24,

NE 1/4 of NW 1/4, Govt. Lot — BM. Parcel (PIN) no. Kootenai
If different than shown in Item 4
for (Check One) Domestic ☒ Stock ☐ Domestic and Stock ☐

Additional places of use, if any —

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.

— or None ☒

13. Remarks:

Records from Purchable Health showed Septic system 1983
Ready for use. This well was the Ohio match water Dist.
Original well

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: 3

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) Lyle & Zifford Date: 6-4-09
Janice M. Ufford Date: 6-4-09

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 —

Address —

Date —

Last Name — Identification No. —

SCANNED

JUN - 8 2009

2770 *221*
UFFORD PIN 52N04W-24-3600



NOTE: This is not a permit for construction purposes. A permit for installation of the system is required.

PANHANDLE HEALTH DISTRICT 1
KOOTENAI COUNTY
SITE SURVEY

Fee: \$5.00

Date March 14, 1983

File #: 5632

Well Site Survey

Sewage Disposal Survey ☒

Inspection For: Charlie Tranmer
Name

664-8261

Phone #

P.O. Box 2289
Mailing Address

Coeur d'Alene, ID 83814
City State Zip

Legal Description of Property:

Tax #9379 in Sec. 24, T 52N, R 4W

SEE ATTACHED

Size: 8.69 Acres

Remarks:

PLEASE USE REVERSE SIDE TO DRAW A MAP WITH DIRECTIONS FROM CO'A TO PROPERTY & PROPOSED LAYOUT OF HOUSE, SEPTIC TANK, DRAINFIELD, WELL, ETC.

THIS SECTION FOR ENVIRONMENTALIST'S USE ONLY.

Remarks: This existing septic tank and absorption system on this parcel was inspected on 3-14-83 and would be acceptable to connect a single family dwelling to. Before this could be done a record purposes plat permit would have to be applied for at this department.

Approved ☒

Disapproved

Conditional

Date

5-5-83

Stanley J. Brown
Environmental Health Specialist

This survey was done under existing Rules & Regulations for Subsurface Sewage Disposal. Final approval and issuance of a permit will be subject to the Rules & Regulations in effect at the time a permit is applied for.

James E. Siebe
Ronald J. Landeck
James L. Westberg
L. Scott Gould

SIEBE, LANDECK, WESTBERG & GOULD
ATTORNEYS AND COUNSELORS AT LAW
208 South Main, Suite 1
P.O. Box 9344
Moscow, Idaho 83843

Telephone:
(208) 883-1505

March 18, 1985

Environmental Department
Panhandle Health District
2195 Ironwood Court
Coeur d'Alene, ID 83814

Dear Panhandle Health District,

This letter constitutes a formal request for a site survey for a parcel of real property located in Sec. 24, Twp. 52 N., R 4W., B.M., Tax No. 9379. We have enclosed the most recent site survey of the property, a legal description, and a check in the amount of \$35.00 for your fee. Please contact this office if you have any questions or desire further information.

Thank you for your cooperation in this matter.

Sincerely,
Siebe, Landeck, Westberg & Gould


John C. Judge

JCJ:lt

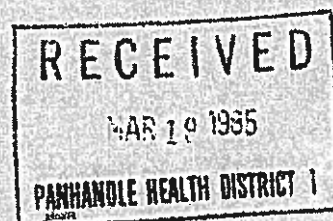


Exhibit "A"

The legal description has been amended to read as follows:

A parcel of land in the Northwest quarter of Section 24, Township 52 North, Range 4 W.B.M., Kootenai County, Idaho, more particularly described as follows:

Beginning at the Northwest corner of said Section 24: thence
East along the North line of said Section 24, 1320.00 feet: thence
South $0^{\circ}05'13''$ West, 840.62 feet to the True Point of Beginning: thence
Continuing South $0^{\circ}05'13''$ West, 572.22 feet to a point: thence
South $87^{\circ}42'39''$ East, 660.00 feet to a point: thence
North $0^{\circ}05'13''$ East, 572.22 feet to a point: thence
North $87^{\circ}42'39''$ West, 660.00 feet to the True Point of Beginning.

EXCEPT the following described parcel:

A 100 foot diameter circle in Section 24, Township 52 North, Range 4 W.B.M., around an existing well, the center of which is located as follows:

Commencing at the Northwest corner of said Section 24: thence
South $87^{\circ}42'39''$ East, 1320 feet: thence
South $0^{\circ}05'13''$ West, 398 feet: thence
South $31^{\circ}36'23''$ East, 110.84 feet: thence
South $55^{\circ}52'17''$ East, 39.3 feet: thence
South $26^{\circ}06'17''$ East, 204.5 feet: thence
South $35^{\circ}22'45''$ East, 166.1 feet: thence
South $11^{\circ}12'17''$ East, 131.7 feet: thence
South $23^{\circ}11'47''$ East, 312.5 feet to the center of an existing well.

General taxes for the year 1984 have been amended to read as follows:

NOTE: General taxes for the year 1984, in the original sum of \$13.06, have been paid in full. Tax Account No. 52N04W-24-2770. (BN 115927)

**PANHANDLE HEALTH DISTRICT I
APPLICATION AND PERMIT FOR ON-SITE SEWAGE SYSTEM**

INDIVIDUAL SEWAGE DISPOSAL SITE EVALUATION

Fee: \$35.00
Date: March 20, 1985
Site Eval. # 7829

Paid: Cash _____ Check ☒ No Fee _____
For (name) Richard White/Ronald J. Landeck, Atty.
Legal description of property Tax #9979 in Sec. 24, T 52N, R4W (see attached for ~~XXXXXX~~ legal)
Parcel created in 1974 per Assessor's Office.
Location Well Road, approx. 1 mile on Ohio Watch (west) to Well Road; property
is approx. 800 ft. on road and on left hand side.
Size of lot XXXX acres ft. x 5.59 acres ft.
Applicant's signature Ronald J. Landeck, Attorney BY MAIL Applicant is: _____ Owner ☒ Other _____
Mailing Address: P.O. Box 9344, Moscow, ID 83843 Phone 882-1372

SITE EVALUATION

Testhole #1 _____ Testhole #2 _____

Testhole #3 _____ Testhole #4 _____

Remarks: Previous site survey #5632- see attached
Approved for connection to existing system per SS#5632 (3/14/83).
Rather than Aquifer sands and gravels as determined by U.S.G.S.

Valid for one year from date: March 22, 1985

By: M. J. [Signature]
Environmental Health Specialist

INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

INDIVIDUAL SEWAGE DISPOSAL PERMIT

Fee: _____
Date: _____

Permit # _____
PLOT PLAN ATTACHED (show house, other buildings, etc.)
No. Living Units _____ Bedrooms _____ People served _____ Other _____
Septic Tank: _____ Gallons, Distance to dwelling foundation: 5 ft. min.
Well: 50 ft. min. Water Line: 10 ft. min. Surface Water: 50 ft. min.
Type of tank: Cement _____ Other _____ Dimensions _____
Disposal area: Drainfield _____ Ab. Bed _____ Other _____
Component separations: Property lines 5 ft. min./Dwelling foundation 20 ft. min./Well 100 ft. min./Surface water 300 ft./min./Neighbor's well 100 ft. min./Septic tank 6 ft. min./Water service lines 25 ft. min./Water suction line 100 ft. min.
Remarks and/or conditions: _____

I understand that this permit is non-transferable and is valid for 1 year from date of application. Drainfield must not exceed 4 feet in depth.

Applicant's Signature _____ Phone: _____
Mailing address: _____ Approved _____ Disapproved _____
Plot plan submitted _____ Environmental Health Specialist
Permit issued by _____

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

Inspection: System covered _____ Approved _____ Not approved _____
Inspected by _____ Installed by _____ Date: _____
Remarks _____

Reference: Rules & Regulations for Individual and Subsurface Sewage Disposal Systems



1553947

FIRST AMERICAN TITLE COMPANY

STATE OF IDAHO }
COUNTY OF KOOTENAI } ss
AT THE REQUEST OF _____
FIRST AMERICAN TITLE COMPANY
SEP 14 11 07 AM '98

DANIEL J. ENGLISH
DEPUTY *sl*
FEE\$ 3.00

***** DEED OF RECONVEYANCE *****

FIRST AMERICAN TITLE INSURANCE COMPANY,
Trustee

in the Deed of Trust executed by: LEIGH O. UFFORD AND JANICE M. UFFORD, HUSBAND AND WIFE

recorded MAY 11, 1988, as Instrument No. 1116547, Records of Kootenai County, State of Idaho, pursuant to the written request of the Beneficiary, does hereby GRANT and RECONVEY unto the PARTIES ENTITLED THERETO, LEGAL OWNERS,

without warranty, all the estate and interest derived to it by or through said Deed of Trust, in the lands therein described.

The corporate name subscribed hereto is pursuant to a resolution authorizing the execution of this reconveyance duly adopted by its Board of Directors.

First American Title Insurance Company

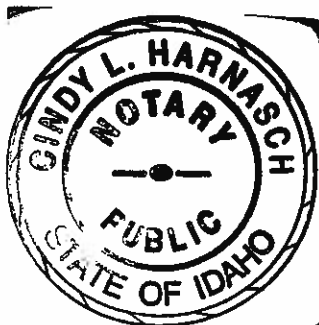
DATED: September 11, 1998

By *Cheryl Hovaldt*
Cheryl Hovaldt - Assistant Secretary

STATE OF IDAHO)
) ss.
COUNTY OF KOOTENAI)

On this September 11, 1998, before me, a Notary Public in and for said State, personally appeared: Cheryl Hovaldt known to me to be the Assistant Secretary of the corporation that executed the within instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.



Cindy L. Harnasch
CINDY L. HARNASCH
Notary Public for the
State of Idaho
Residing at: COEUR D'ALENE
Commission Expires: 4/14/99

WELL DRILLER'S REPORT

JUL 2 1974

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

1. WELL OWNER Name <u>Bob Cooper</u> Address <u>CDA Idaho</u> Owner's Permit No. <u>95-74-N-95</u>		7. WATER LEVEL Static water level <u>230</u> feet below land surface Flowing? ☐ Yes ☐ No G.P.M. flow _____ Temperature _____ ° F. Quality _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																																									
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning)		8. WELL TEST DATA <u>air</u> ☐ Pump ☐ Bailer ☒ Other Discharge G.P.M. <u>50 GPM</u> Draw Down _____ Hours Pumped _____																																									
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) _____ ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection		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>8"</td><td>0</td><td>5</td><td>Brown top soil</td><td></td><td>X</td></tr><tr><td></td><td>5</td><td>25</td><td>Sand and Gravel</td><td></td><td>X</td></tr><tr><td></td><td>25</td><td>120</td><td>Sand and Gravel</td><td></td><td>X</td></tr><tr><td>6"</td><td>120</td><td>220</td><td>Gravel and Clay</td><td></td><td>X</td></tr><tr><td></td><td>220</td><td>322</td><td>Sand and Gravel</td><td>X</td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	8"	0	5	Brown top soil		X		5	25	Sand and Gravel		X		25	120	Sand and Gravel		X	6"	120	220	Gravel and Clay		X		220	322	Sand and Gravel	X	
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4. METHOD DRILLED ☒ Cable ☐ Rotary ☐ Dug ☐ Other																																											
5. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>322</u> feet Casing schedule: ☐ Steel ☐ Concrete Thickness _____ Diameter _____ From _____ To _____ <u>250</u> inches <u>8</u> inches <u>+1</u> feet <u>120</u> feet <u>250</u> inches <u>6</u> inches <u>+1</u> feet <u>322</u> feet Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch 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>18</u> Material used in seal ☐ Cement grout ☒ Pudding clay ☒ Well cuttings Sealing procedure used ☐ Shurry pit ☐ Temporary surface casing ☒ Overbore to seal depth																																											
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>NW 1/4 NW 1/4 Sec. 24 T. 52 N. R. 4 E</u>		10. Work started <u>4 12 74</u> finished <u>4 29 74</u> 11. DRILLERS CERTIFICATION Firm Name <u>Carmen Development Co.</u> Firm No. <u>228</u> Address <u>220 Main St. Boise Idaho</u> Date <u>4 29 74</u> Signed by (Firm Official) <u>John Carmen</u> and (Operator) <u>John Carmen</u> MICROFILMED																																									

52n04W-24-2720

**PANHANDLE HEALTH DISTRICT I
APPLICATION AND PERMIT FOR ON-SITE SEWAGE SYSTEM**

INDIVIDUAL SEWAGE DISPOSAL SITE EVALUATION

Fee: \$35.00

Paid: Cash _____ Check ☒ No Fee _____

Date: March 20, 1985

Site Eval. # 7889

For (name) Richard White/Ronald J. Landeck, Atty. See vital
 Legal description of property Tax #9379 in Sec. 24, T 52N, R4W (see attached for ~~XXXXXX~~ legal)
Parcel created in 1974 per Assessor's Office.
 Location Well Road, approx. 1 mile on Ohio Match (west) to Well Road; property
is approx. 800 ft. on road and on left hand side.
 Size of lot ~~XXXX~~ acres ft. x 5.69 acres ft.
 Applicant's signature Ronald J. Landeck, Attorney BY MAIL Applicant is: _____ Owner ☒ Other _____
 Mailing Address: P.O. Box 9344, Moscow, ID 83843 Phone 882-1372

SITE EVALUATION

Testhole #1

Testhole #2

Testhole #3

Testhole #4

Remarks: Previous site survey #5632-see attached
Approved for connection to existing system per SS#5632 (3/14/83).
Rathdrum Aquifer sands and gravels as determined by U.S.G.S.

Valid for one year from date: March 22, 1985

By: Maria Manly
 Environmental Health Specialist

INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

INDIVIDUAL SEWAGE DISPOSAL PERMIT

Fee: _____

Date: _____

Permit # _____
 PLOT PLAN ATTACHED (show house, other buildings, etc.)
 No. Living Units _____ Bedrooms _____ People served _____ Other _____
 Septic Tank: _____ Gallons, Distance to dwelling foundation: 5 ft. min.
 Well: 50 ft. min. Water Line: 10 ft. min. Surface Water: 50 ft. min.
 Type of tank: Cement _____ Other _____
 Disposal area: Drainfield _____ Ab. Bed _____ Other _____ Dimensions _____
 Component separations: Property lines 5 ft. min./Dwelling foundation 20 ft. min./Well 100 ft. min./Surface water 300 ft./min./Neighbor's well 100 ft. min./Septic tank 6 ft. min./Water service lines 25 ft. min./Water suction line 100 ft. min.
 Remarks and/or conditions: _____

I understand that this permit is non-transferable and is valid for 1 year from date of application. Drainfield must not exceed 4 feet in depth.

Applicant's Signature _____ Phone: _____
 Mailing address: _____
 Plot plan submitted _____ Approved _____ Disapproved _____
 Permit issued by _____, Environmental Health Specialist

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

Inspection: System covered _____ Approved _____ Not approved _____
 Inspected by _____ Installed by _____
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Reference: Rules & Regulations for Individual and Subsurface Sewage Disposal Systems