

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 95-11827

Date Received: 7/1/9

Receipt No: NDJ-096

Received By: Ren

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) John H. Wheeler Phone () 208 683-5626

Mailing Address P.O. Box 454 Arthol 20 Zip 83801
Street or Box City State

2. Date of Priority: (Only one per claim) 8-1-0
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 53N, Range 3W, Section 11,
NW 1/4 of 80 1/4, or Govt. Lot _____ BM. County of Kootenay;
Parcel (PIN) no. 05 0655-001-005-0

Additional points of diversion if any: none

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 & pump

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

For Domestic purposes from 4-1 to 12-31 amount .04 cfs
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .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) _____

SCANNED

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9. Location of Place of Use is: Township 52N, Range 3W, Section 11,
NW 1/4 of Se 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 None

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:

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) John H. Walker Date: 7-1-09

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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IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D0040031Drilling Permit No: 831911

Other IDWR No. _____

2. OWNER

Name Wheeler, JohnWell Number: 928Address PO Box 1288City Hayden State ID Zip 83835

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

W	N	E	Twp. <u>53</u>	☒ North or ☐ South
			Rge. <u>3</u>	☐ East or ☒ West
			Sec. <u>11</u>	<u>NW 1/4 SE 1/4</u> <u>1/4</u>

Gov't Lot _____ County KOOTENAI

Lat: : : Long: : :

Address of Well Site Scout TrailCity Athol

(Give at least name of road + Distance to Road or Landmark)

Lt. #2

Blk. _____

Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT Sacks or Pounds	METHOD
Material	From	To		
BENTONITE	0	18	300 lbs	overbore

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) RB 4Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	455	.250	Steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

393 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or

control devices: Welded on cap

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
15			

Water Temp. Cold Bottom Hole Temp ColdWater Quality test or comments: CloudyDepth first Water encountered 393

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
8	0	46	Sands, Gravels & Cobble	☐ Y	☒ N
8	46	166	Sand & Gravel	☐ Y	☒ N
8	166	170	Boulder	☐ Y	☒ N
8	170	247	Sand & Gravels	☐ Y	☒ N
8	247	250	Boulder	☐ Y	☒ N
8	250	371	Sand & Gravels	☐ Y	☒ N
8	371	376	Boulder	☐ Y	☒ N
8	376	399	Sand & gravels	☐ Y	☒ N
8	399	402	Boulder	☐ Y	☒ N
8	402	455	Sands & Gravels w/ water	☒ Y	☐ N

Completed Depth 455 (Measurable)Date: Started 3/29/2005 Completed 4/4/2005

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O Well Service, Inc. Firm No. 448Firm Official [Signature] Date 4-13-05and Supervisor or Operator [Signature] Date 04/04/05

Todd Morgan

(Sign Once If Firm Official and Operator)

53N 3W 11