

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 95-12624

Date Received: 8/31/9

Receipt No: N021621

Received By: Kee

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) Susan ^{H&R} Gae and Conti Phone 208 687 4411

Mailing Address 15526 Songbird Ln Rathdrum ID Zip 83858
Street or Box City State

2. Date of Priority: (Only one per claim) 4/25/2007
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 52N, Range 5W, Section 34,
SW 1/4 of NE 1/4, or Govt. Lot _____ BM. County of Kootenai;

Parcel (PIN) no. -1270

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.

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

For Domestic purposes from 1/31 to 12/31 amount .04 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) 1 Household

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AUG - 3 2009

9. Location of Place of Use is: Township 52N, Range 5W, Section 34,
SW 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 _____

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

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) Susan J. Conti Date: 8/3/09

_____ 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			
Well ID No.			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D 0051243

DRILLING PERMIT NO. _____

Water Right or Injection Well No. _____

2. OWNER:

Name Gaetano Conti
Address 2870 E. 12th Ave.
City Post Falls State ID Zip 83854

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 52 North ☒ or South ☐
Rge. 5 East ☐ or West ☒
Sec. 34 1/4 SW 1/4 NE 1/4
Gov't Lot _____ County Kootenai 160 acres

Lat: : : Long: : :

Address of Well Site Song Bird Lane
City Rathdrum

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

Lt. _____ 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 Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	38	9 sacks	Dry pour

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 40Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	40	.25	Steel	☒	☐	☒	☐
4"	-10	800	200	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
760	800	3/8	160	4"	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

160 ft. below ground Artesian pressure _____ lb.Depth flow encountered 183 ft. Describe access port or control devices: _____Steel Cap Welded

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
2	100%	798	1 Hour

Water Temp. ColdBottom hole temp. ColdWater Quality test or comments: Clear, Cold, No SmellDepth first Water Encounter 183

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	1	Top soil		X
8	1	30	Decomposed Granite		X
8	30	38	Granite brown/white/medium		X
6	38	70	Granite brown/white/black		X
6	70	110	Granite purple/black/white		X
6	110	135	Granite black/white/firm		X
6	135	158	Granite purple/brown/white		X
6	158	167	Granite green/white/soft		X
6	167	340	Granite purple/black/med.	X	
6	340	360	Granite green/black/soft		X
6	360	530	Granite purple/white/black		X
6	530	570	Granite green/white/soft		X
6	570	605	Granite purple/black/white		X
6	605	615	Granite purple/black/soft		X
6	615	681	Granite purple/white/med.		X
6	681	695	Granite green/black/soft		X
6	695	742	Granite purple/black/white		X
6	742	759	Granite green/black/soft	X	
6	759	800	Granite purple/black/med.		X

UNITED
PUMP & DRILLING
3125 W. Hayden Ave. Hayden, ID 83835
Office (800) 682-9641 (208) 772-7867

Completed Depth 800 FT (Measurable)Date: Started 4-23-07 Completed 4-25-07

14. DRILLER'S CERTIFICATION

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

Company Name United Pump & Drilling Firm No. 636Principal Driller Jason Beckham Date 4-25-07and
Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES