

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 45-13200
Date Received: 01/29/2010
Receipt No: N023479
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) Harold A. Waldo Phone (208) 755-8299

Mailing Address 16503 N Smith Ave Hauser Id Zip 83854
Street or Box City State

2. Date of Priority: (Only one per claim) 12/23/09
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 5 N, Range 05 W, Section 6,
SW 1/4 of SE 1/4, or Govt. Lot _____ BM. County of Kootenai;

Parcel (PIN) no. 51N05W-06-8595

Additional points of diversion if any: NA

If available, GPS coordinates: NA

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.

D0039836 well drilled 2004 and connected
To existing cabin all ready on property

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 12-31 amount .04
Month/Day Month/Day cfs (c) or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 cfs (c) 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

FEB - 1 2010

9. Location of Place of Use is: Township 5 N, Range 05 W, Section 6

SW 1/4 of SE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 51N05W-06-8595
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.

_____ or None (☒

13. Remarks: There is a shared well agreement
with owner of 51N05W-06-8595

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) Kenneth Walden Date: 1/29/10

Date: _____

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

Title of _____ Organization

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

Title of _____ 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. COANNED

FEB - 1 2010

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. D0039636

DRILLING PERMIT NO

826291

Other IDWR No

2. OWNER:

Name Dick Waldo

Address 27769 West Highway 53

City Hauser Lake

State ID

Zip 83854

3. LOCATION OF WELL by legal description:

N		Twp	51N	North	☒	or	South	☐
W		Rge	05W	East	☐	or	West	☒
E		Sec	06	1/4 SW 1/4 SE 1/4				
S				10 Ac	40 Ac	160 Ac		
		Gov't Lot	County		Kootenai			
		Lat	Long					

Address of Well Site: (see next line)

Smith Avenue

City Post Falls

Lot

Blk

Sub. Name (see next line)

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	Method
Material	From	To	Sacks/Lbs	
Bentonite Grans	0	35	7 sacks	Dry Pour

Drive Shoe Used? ☒ Y ☐ N Shoe Depth(s) 300

Drive Shoe Seal Tested? ☐ Y ☒ N How?

8. CASING/LINER

Diam	From	To	Gauge	Material	Casing	Liner	Weld	Thrded
6	+1	35	0.250	Steel	☒	☐	☒	☐
4	20	300	0.185	PVC	☐	☒	☒	☐
					☐	☐	☐	☐

Length Headpipe 36 Length Tailpipe 280

9. PERFORATIONS/SCREENS

- ☒ Perforations? Method Drilled Liner
☐ Screens? Screen Type

From	To	Slot	Nmbr	Diam	Material	Casing	Liner
220	280	3/8"	200	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

100 ft. below ground. Artesian pressure lb.

Depth flow encountered 145 ft. Describe access port or control devices: Steel Cap Welded

11. WELL TESTS

- ☐ Pum ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
12	100%	295	1 Hour

Water Temp. Cold Bottom hole temp. Cold

Water Quality test or comments: (below) Depth first Water Encountered 145

Slight Color, Cold, No Smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Lithology, Water Quality and Temperature	Water	
				Y	N
8	0	24	Granite: Brown Decomposed Soft	☐	☒
8	24	35	Granite: Brown Medium Soft	☐	☒
5	35	145	Granite: Brown Medium Soft	☐	☒
6	145	150	Granite: Broken (6GPM)	☒	☐
6	150	178	Granite: Brown Medium Soft	☐	☒
6	178	182	Granite: Broken (6GPM)	☒	☐
6	182	300	Granite: Salt and Pepper Medium	☐	☒

RECEIVED

DEC 14 2004

IDWR/North

Completed Dept 300 (Measurable)

Date: Started 11/19/2004 Complete 11/22/2004

13. DRILLERS CERTIFICATION

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

Firm Name United Drilling Inc.

Firm N 414

Firm Official and

Tim N. Valdez pres.

Date 11/22/2004

Supervisor or Operator Curtis S. Hammond

Date 11/22/2004

51N 5W 6

My name is Joel Marne Smith, My adress is 16154 N. Smith road. My Wife Judi and I purchased our 5 acre parcel in the early 80s and were neighbors to Jean Smith, she was the owner of the property now owned by "Bud" Harold Waldo, there existed a Cabin that Jean occupied prior^{to} and during the time my Wife and children and I lived at 16154 N. Smith Rd the Cabin remains and is currently occupied by "Bud" Harold Waldo. Bud drilled his well in 2004.

Joel M Smith

JOEL M. SMITH
16154 N. SMITH Rd
HAUSER LK. / POST FALLS
IDAHO 83854

WALDO PIN 51N05W-06-8595



8645