

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 95-13262Date Received: 02/17/2010Receipt No: N023578Received 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) TIMOTHY D. AND OR CAROLINE E. DEITZ Phone 208 777-8873

Mailing Address P.O. Box 1757 POST FALLS, ID Zip 83877
Street or Box City State

2. Date of Priority: (Only one per claim) 08/15/1979
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 50, Range 5W, Section 11,
SW 1/4 of SW 1/4, or Govt. Lot _____ BM. County of KOOTENAI;

Parcel (PIN) no. 50N05W-11-6375

Additional points of diversion if any: N/A

If available, GPS coordinates: N/A

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 #1 DRILLED 1979 REPLACED BY WELL #2 IN 1989
CONNECTED TO HOME BUILT IN 1980

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 0.4 cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.4 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 HOME

SCANNED

FEB 17 2010

9. Location of Place of Use is: Township 50, Range 5W, Section 11,
SW 1/4 of SW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
for (Check One) Domestic ☒ Stock () Domestic and Stock () If different than shown in Item 4
Additional places of use, if any N/A

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:

WELL # 1 BURIED AFTER TAKEN OUT OF SERVICE

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) Indy D. Ditt Date: 2-16-10

Carsten E. Ditt Date: 2-16-10

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
FEB 17 2010

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER, OR
BALLPOINT PEN

RECEIVED

APR 28 1989

NORTHERN REGION
I D W R

7. WELL OWNER

Name FIRST Federal S&L
Address 401 front ave
Owner's Permit No. 95-89-N-15

7. WATER LEVEL

Static water level 340 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature Cool °F. Quality Good NO SMELL
Describe artesian or temperature zones below.

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

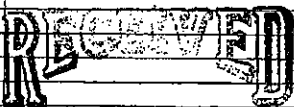
☐ Pump ☐ Bailer ☒ Air ☐ Other

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
B	0	42			
6	42	700			
	0	3	top soil		X
	3	35	soft decomposed Granite		X
	35	70	hard decomposed Granite		X
	70	700	hard soft & pebbly Granite	X	



RECEIVED

MAY 11 1989

Department of Water Resources

4. METHOD DRILLED

☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other PVC

Thickness	Diameter	From	To
<u>350</u> inches	<u>6</u> inches	<u>2</u> feet	<u>42</u> feet
<u>14</u> inches	<u>4</u> inches	<u>16</u> feet	<u>700</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used?	☒ Yes	☐ No
Was a packer or seal used?	☒ Yes	☐ No
Perforated?	☒ Yes	☐ No

How perforated? ☐ Factory ☒ Knife ☐ Torch
Size of perforation 1/8 inches by 3 inches

Number	From	To
<u>100</u> perforations	<u>520</u> feet	<u>700</u> 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 18 Material used in seal: ☐ Cement grout
☒ Bentonite ☐ Puddling 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

6. LOCATION OF WELL

Sketch map location must agree with written location.

N
 W E
 X

Subdivision Name _____
 DEC 04 1991
 Lot No. _____ Block No. _____

County Kootenai
SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 11 T. 50 N. S. R. 5 E. 10

10.

Work started 4-13-89 finished 4-19-89

11. DRILLERS CERTIFICATION

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

Firm Name H20 Firm No. 448

Address Harbin, Heilo Date 4-20-88

Signed by (Firm Official) John Wheeler

and
(Operator) *Wayne Miller*

DEITZ PIN 50N05W-11-6375

