

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 75-13350Date Received: 01/13/2010Receipt No: N023360Received 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) Leo J. Berchtold Living Trust Phone (208) 687 1300Mailing Address 13425 N Church Rd Rathdrum Id Zip 83858
Street or Box City State2. Date of Priority: (Only one per claim) 8-19-1977
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 51N, Range 5W, Section 5,
NE 1/4 of SE 1/4, or Govt. Lot _____ BM. County of Kootena;
Parcel (PIN) no. 0-J429-001-002-0

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.

Well and 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 Jan 1 to Dec 31 amount 02.04 cfs (X) or AFY ()For Stock water purposes from Jan 1 to Dec 31 amount .027. Total Quantity claimed 02.04 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 house, livestock various amounts
20 or less head mixed stock

SCANNED
JAN 13 2010

9. Location of Place of Use is: Township 51N, Range 5W, Section 5,
NE 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 (X)

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 (X) 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 (X)

13. Remarks: well drilled in 1977 (95-77-N-113)

14. Basis of Claim (Check One) Beneficial Use (X) 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 (X) 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) Leo Berchtold

Date: Jan 13, 2010

Trustee, Leo Berchtold Living Trust

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. _____

SCANNED
JAN 13 2010

USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

RECEIVED
8261 91 NVC

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

Department of Water Resources

1. WELL OWNER

Name LED J. or Joyce E. BERTHOLD
Address Rt 3 Box 148 Rathbun, Iowa 83888
Owner's Permit No. 95-27-N-113

7. WATER LEVEL

Static water level 250 feet below land surface
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Temperature 61.1 ° F. Quality Good
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

☐ Pump ☐ Bailer ☒ Other

Discharge G.P.M.	Draw Down	Hours Pumped
<u>1 GPM</u>	<u>?</u>	<u>1 hr</u>

3. PROPOSED USE

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

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
<u>6</u>	<u>0</u>	<u>25</u>	<u>Decomposed Granite</u>	<u>X</u>	<u>X</u>
	<u>25</u>	<u>30</u>	<u>Grd nite</u>	<u>X</u>	<u>X</u>
<u>6</u>	<u>30</u>	<u>500</u>	<u>Grd nite</u>	<u>X</u>	

4. METHOD DRILLED

☐ Cable ☒ Rotary ☐ Dug ☐ Other

5. WELL CONSTRUCTION

Diameter of hole 6 inches Total depth 500 feet

Casing schedule: ☒ Steel ☐ Concrete

Thickness	Diameter	From	To
<u>.250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>30</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ 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 _____ 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 20 Material used in seal ☐ Cement grout

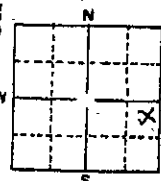
☒ Pudding clay ☒ Well cuttings

Sealing procedure used ☐ Sherry 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 KOOTENAI

NE 1/4 SE 1/4 Sec. 5, T. 51 N. R. 5 W.

10.

Work started 8/16/77 finished 8/19/77

11. DRILLERS CERTIFICATION

Firm Name Associated Well Drillers Inc. No. 245

Address Box 723, C. DA Idaho Date 8/23/77

Signed by (Firm Official) Bob Thornton

and
(Operator) Robert F. Dugan

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT

LEO BERCHTOLD LIVING TRUST PIN 0-J429-001-002-0

