

# 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 95-13446Date Received: 8/25/09Receipt No: 11021853Received By: Hea

## 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) TERRY & /OR RENEA FOLDVIK Phone (208) 687 9074Mailing Address 20800 N. HOPE VALLEY RD RATHDRUM ID Zip 83858  
Street or Box City State2. Date of Priority: (Only one per claim) JANUARY 1, 1993  
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 52N, Range 4W, Section 14,  
SE 1/4 of NE 1/4, or Govt. Lot \_\_\_\_\_ BM. County of KOOTENAI;Parcel (PIN) no. #52N04W-14-0450Additional points of diversion if any: 52N 4W 14 SE 1/4 of NE 1/4

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 JAN 1 to DEC 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 HOME

SCANNED

AUG 25 2009

9. Location of Place of Use is: Township 52N, Range 4W, Section 14,  
SE 1/4 of NE 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 \_\_\_\_\_

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) Rhonda Foldvik Date: 8-25-2009

\_\_\_\_\_  
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. \_\_\_\_\_

SCANNED

AUG 25 2009

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.

1. WELL OWNER

Name Terry Faldvick - Jeff Lohmiller  
Address W. Chileo Rd  
Drilling Permit No. 95-92-C-15  
Water Right Permit No. \_\_\_\_\_

2. NATURE OF WORK

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

3. PROPOSED USE

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

4. METHOD DRILLED

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

5. WELL CONSTRUCTION

380' PVC  
Casing schedule: ☒ Steel
☐ Concrete
☐ Other \_\_\_\_\_  
Thickness \_\_\_\_\_ Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
.250 inches 6" inches + 3 feet -192 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 SKILL SAW  
How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun  
Size of perforation 1/8 inches by 9" inches  
Number \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
60 perforations 360 feet 380 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  
☒ Bentonite ☒ Puddling clay ☐ \_\_\_\_\_  
Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing  
☐ Overbore to seal depth  
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent  
☐ Cemented between strata  
Describe access port \_\_\_\_\_

6. LOCATION OF WELL

Sketch map location must agree with written location.  

N

W

E

S

148

Subdivision Name \_\_\_\_\_  
Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_  
County Kootenai  
SE 1/4 NE 1/4 Sec. 14, T. 52 N. R. 4 W.

7. WATER LEVEL

Static water level 200 feet below land surface.  
Flowing? ☐ Yes ☐ No G.P.M. flow \_\_\_\_\_  
Artesian closed-in pressure \_\_\_\_\_ p.s.i.  
Controlled by: ☐ Valve ☐ Cap ☐ Plug  
Temperature \_\_\_\_\_ OF. Quality \_\_\_\_\_  
Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump
☐ Bailer
☐ Air
☐ Other \_\_\_\_\_  
Discharge G.P.M. \_\_\_\_\_ Pumping Level \_\_\_\_\_ Hours Pumped \_\_\_\_\_  
10 to 20

9. LITHOLOGIC LOG

84981  

| Bore Diam. | Depth |     | Material                          | Water Yes No |
|------------|-------|-----|-----------------------------------|--------------|
|            | From  | To  |                                   |              |
| 8          | 0     | 14  | Top Soil Gravel                   | X            |
| 8          | 14    | 23  | Sand & Gravel 1/4 Cobble          | X            |
| 8          | 23    | 85  | Sand & Gravel 1/4 Boulders        | X            |
| 8          | 85    | 88  | Basalt Dark Gray Hard             | X            |
| 8          | 88    | 145 | Basalt Broken 1/4 Clay Brown Soft | X            |
| 8          | 145   | 190 | Clay Light Gray Med               | X            |
| 8          | 190   | 200 | Clay Brown 1/4 Basalt Gravel      | X            |
| 6          | 200   | 360 | Clay Yellowish Brown Med          | X            |
| 6          | 360   | 375 | Sand White Coarse 1/4 water       | X            |
| 6          | 375   | 396 | Silty Clay Gray Soft              | X            |

  
4" to 8" Formation Packer  
Set 40' off Bottom of Lines

10. RECEIVED

SEP 18 1992  
Department of Water Resources  
DEC 04 1992  
1992  
1992

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.  
Firm Name H2O Well Svc. Firm No. 448  
Address Hayden 16 Rd Date 8-17-92  
Signed by (Firm Official) Burt M. Cuff  
and L. E. H.  
(Operator) 9/2/92  
10/1

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT