

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 95-13469Date Received: 01/20/2010Receipt No: N023439Received By: am

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) RICK ROMJUE Phone (208) 6400501Mailing Address PO BOX 2558 POST FALLS ID Zip 83877
Street or Box City State2. Date of Priority: (Only one per claim) 5-12-2007 BR
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 48N, Range 04W, Section 6,
NW 1/4 of SW 1/4, or Govt. Lot 6 BM. County of KOOTENAI;Parcel (PIN) no. 0-6740-001-008-AAdditional points of diversion if any: N/AIf 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.

D0041409 WELL COMPLETED 2006
CONNECTED TO 1 HOME & FUTURE SHOP (STURBED)

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 0.04 cfs ☒ or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.04 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

COANNED

JAN 20 2010

9. Location of Place of Use is: Township 48N, Range 04W, Section 6,
NW 1/4 of SW 1/4, Govt. Lot 6 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 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:

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) Dick Rompue Date: 1-20-10

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 _____ Date _____

Address _____

Last Name _____ Identification No. _____

COANNED

JAN 20 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. D0041409

DRILLING PERMIT NO. 839993

Other IDWR No. _____

2. OWNER:

Name Rick Romjue

Address / 1836 Northwest Boulevard Suite 100

City Coeur d'Alene State ID _____ Zip 83814

3. LOCATION OF WELL by legal description:

N		Twp 48N	North ☒ or South ☐
W		Rge 04W	East ☐ or West ☒
E		Sec 06	1/4 NW 1/4 SW 1/4
S		Gov't Lot _____	County Kootenai
		Lat _____	Long _____
Address of Well Site: (see next line)			

Potter Rd

City Coeur d'Alene

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 Gran.	0	50	9 sacks	dry pour

Drive Shoe Used? ☐ Y ☒ N Shoe Depth(s) _____Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6	2	215	0.250	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations? Method Torch
☐ Screens? Screen Type _____

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
195	215	1/2 X	40	6	Steel	☒	☐
		12				☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

50 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 157/170 ft. Describe access port or control devices: Steel cap welded

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
17	100	210	1 hour

Water Temp. _____ cold Bottom hole temp. _____ cold

Water Quality test or comments: (below) Depth first Water Encountered 157
cold, clear, no smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water
8	0	11	Clay - brown	☐ Y ☒ N
8	11	157	Basalt - black - hard	☐ Y ☒ N
8	157	159	Basalt - black - soft - 7 gpm	☒ Y ☐ N
8	159	170	Basalt - black - hard	☐ Y ☒ N
8	170	173	Basalt - black - broken - 10 gpm	☒ Y ☐ N
8	173	212	Basalt - black - medium	☐ Y ☒ N
8	212	215	Clay - black	☐ Y ☒ N

RECEIVED
JUN 14 2006
IDWR/NorthCompleted Depth 215 (Measurable)
Date: Started 5/30/2006 Completed 5/31/2006

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 No 414

Firm Official and Jason C. Beckham Date 5/31/2006

Supervisor or Operator Jason C. Beckham Date 5/31/2006

48N 4W 6

ROMJUE PIN 0-6740-001-008-A

