

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 95-13507Date Received: 8/27/2009Receipt No: N021902Received By: JM

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) Thomas T. Keison Phone 208-772-3903Mailing Address P.O. Box 95 Hayden Lake, Id Zip 83835
Street or Box City State2. Date of Priority: (Only one per claim) 05-27-1988
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 3W Section 34
SW 1/4 of SE 1/4, or Govt. Lot 8 BM. County of KootenaiParcel (PIN) no. 0-1473-001-001-0Additional points of diversion if any: NAIf 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.

95-87-N-62 Well completed 1987
and connected to One (1) Home

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 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) One Home

CORRECTED

AUG 27 2009

9. Location of Place of Use is: Township 52N, Range 3W, Section 34,

SW 1/4 of SE 1/4, Govt. Lot 8 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:

attachment with permit ID # 15593
Dated 05-27-1988 is building permit showing occupancy for home.

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) Thomas T. Keison Date: 8-27-09

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

AUG 27 2009



WELL DRILLER'S REPORT

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 <u>Tom Keenan</u> Address <u>P.O. Box 95 H.S. Idaho</u> Owner's Permit No. <u>95-87-N-62</u>	7. WATER LEVEL Static water level <u>60</u> 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 _____ <i>Describe artesian or temperature zones below.</i>																																																																												
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 ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">5</td> <td style="text-align: center;">250'</td> <td style="text-align: center;">4</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	5	250'	4																																																																						
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>8"</td> <td>0</td> <td>18 1/2</td> <td>TOP SOIL</td> <td></td> <td>X</td> </tr> <tr> <td>8"</td> <td>15</td> <td>18 1/2</td> <td>DECOMP.</td> <td></td> <td>X</td> </tr> <tr> <td>6"</td> <td>18 1/2</td> <td>85</td> <td>HARD BROWN GRANITE</td> <td></td> <td>X</td> </tr> <tr> <td>6"</td> <td>85</td> <td>90</td> <td>SOFT SPOT</td> <td>X</td> <td></td> </tr> <tr> <td>6"</td> <td>90</td> <td>107</td> <td>HARD BLACK & WHITE GONNE</td> <td></td> <td>X</td> </tr> <tr> <td>"</td> <td>107</td> <td>120</td> <td>SOFT B&W GRANITE</td> <td></td> <td>X</td> </tr> <tr> <td>"</td> <td>120</td> <td>125</td> <td>HARD B&W GRANITE</td> <td></td> <td>X</td> </tr> <tr> <td>"</td> <td>125</td> <td>125</td> <td>SOFT B&W GRAN</td> <td></td> <td>X</td> </tr> <tr> <td>"</td> <td>125</td> <td>200</td> <td>HARD B&W GRANITE</td> <td></td> <td>X</td> </tr> <tr> <td>"</td> <td>200</td> <td>205</td> <td>BROKEN SPOT B&W GRAN</td> <td>X</td> <td></td> </tr> <tr> <td>"</td> <td>205</td> <td>250</td> <td>HARD B&W GRANITE</td> <td></td> <td>X</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	8"	0	18 1/2	TOP SOIL		X	8"	15	18 1/2	DECOMP.		X	6"	18 1/2	85	HARD BROWN GRANITE		X	6"	85	90	SOFT SPOT	X		6"	90	107	HARD BLACK & WHITE GONNE		X	"	107	120	SOFT B&W GRANITE		X	"	120	125	HARD B&W GRANITE		X	"	125	125	SOFT B&W GRAN		X	"	125	200	HARD B&W GRANITE		X	"	200	205	BROKEN SPOT B&W GRAN	X		"	205	250	HARD B&W GRANITE		X
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	10. RECEIVED JUN 1 1987 Department of Water Resources Northern District Office RECEIVED JUN 09 1987 013658 Department of Water Resources																																																																												
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>250 inches</td> <td>6"</td> <td>1 1/2 feet</td> <td>18 1/2 feet</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> 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 <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> 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 <u>18 1/2</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding 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 _____	Thickness	Diameter	From	To	250 inches	6"	1 1/2 feet	18 1/2 feet													Number	From	To										11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H2O well Service</u> Firm No. <u>448</u> Address <u>H.S. Idaho</u> Date <u>5-27-87</u> Signed by (Firm Official) <u>John H. Wheeler</u> and (Operator) <u>W. J. [Signature]</u>																																												
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6. LOCATION OF WELL Sketch map location must agree with written location N W E X Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> SE 1/4 Sec. <u>34</u> T. <u>52</u> S. R. <u>3</u> E. <u>10</u>	7. RECEIVED MAR 09 1988																																																																												

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

House

Permits

8/27/2009

PERMITID	PERMITDT	PLAN	PIN	ALTID
15593	05-27-1988	7746	52N03W34850	108753

RECEIVED

AUG 27 2009

FOOTERIA COUNTY
BLDG & PLANNING DEPT

KEISON PIN 0-J473-001-001-0

