

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 95-13759Date Received: 3-11-10Receipt No: W023772Received By: um

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

RECEIVED

MAR 11 2010

IDWR/North

1. Name of Claimant(s) W. Richard Furnas Phone (208) 666-0334

Mailing Address 6729 Dower Road Coeur d Alene ID Zip 83814
Street or Box City State

2. Date of Priority: (Only one per claim) 8/15/97
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 50 N, Range 4 W, Section 31,
_____ 1/4 of _____ 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. 50N04W311900

Additional points of diversion if any: _____

If available, GPS coordinates: 47°38'21"N 116°52'64"W

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

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from 1/1 to 12/31 amount .04 cfs(✓) or AFY()

For Stock purposes from 1/1 to 12/31 amount .02

7. Total Quantity claimed .06 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 household5 stock

COANNED
MAR 11 2010

9. Location of Place of Use is: Township 50N, Range 4W, Section 31
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 50N04W311900
_____ If different than shown in Item 4
for (Check One) Domestic () Stock () Domestic and Stock (✓)

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) W. Richard Furness Date: 3/8/10
_____ 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. _____

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MAR 11 2010

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____		Long: _____	

1. DRILLING PERMIT NO. 95-97-N-70
Other IDWR No. _____

2. OWNER:
Name Richard Furnas
Address 2900 Gov't. Way Ste. 302
City Coeur d'Alene State ID Zip 83814

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N			
S			

Twp. 50 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 31 1/4 SE 1/4 NE 1/4
Gov't Lot _____ County Kootenai 160 acres
Lat: 47:38:10N Long: 116:52:39W
Address of Well Site Dower Road City Coeur d'Alene
(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Bk. _____ Sub. Name _____

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 or Pounds	
Bentonite	0	24	300#	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____
Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1 1/2	24 1/2	.250	Steel	☒	☐	☐	☐
4"	-10	400	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method 1/8 x 4" saw cut
Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
370	400		28			☐	☒

11. WELL TESTS:

☒ Pump ☒ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5 GPM	85'	bailor	

Water Temp. 48.6° Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encountered 34'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
10"	0	22	Schist, mica, decomposed	x
10"	22	24	Schist, mica, hard tan	x
6"	24	34	Schist, mica, fractures	x
	34	45	Schist, mica w/ quartz	x
	45	62	Schist, soft decomposed	x
	62	68	Schist, mica, green/tan	x
	68	92	Schist, mica, soft spots	x
	92	116	Schist, mica, grey w/ intermittent soft spots	x
	116	138	Schist, mica, hard grey	x
	138	177	Schist, mica, hard	x
	177	188	Gneiss, plagioclase biotite	x
	188	212	Gneiss, H. green/grey	x
	212	246	Gneiss, w/Sillimanite-mica	x
	246	260	Gneiss, dark grey, Hard	x
	260	270	Schist, mica, hard w/soft zones, fractures	x
	270	287	Gneiss, grey/green med hard	x
	287	-	Fractures	x
	287	299	Gneiss, dark grey, soft	x
	299	320	Gneiss, hard & soft zones	x
	320	330	Schist, mica, w/black argillite	x
	330	340	Gneiss, mica w/ soft spots	x
	340	354	Gneiss, grey w/mica	x
	354	371	Gneiss, dark grey argillite	x
	371	385	Gneiss, fractures med hrd	x
	385	390	Gneiss, hard black & white	x
	390	396	Gneiss, med hard frac.	x
	396	400	Gneiss, hard w/black & white argillite, shale	x

Completed Depth 400' (Measurable)
Date: Started 7/20/97 Completed 8/8/97

13. DRILLER'S CERTIFICATION

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

Firm Name McCarty & Associates Firm No. 286

Firm Official [Signature] Date 8-15-97
and _____

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

14. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

23 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____