

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 95-13768Date Received: 03/12/2010Receipt No: N023799Received By: ELM

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) JAMES VAN DERBERG MATTEUCCI Phone (208) 664 5180Mailing Address 16292 S Rockford Hts Rd CDA ID Zip 83814
Street or Box City State2. Date of Priority: (Only one per claim) Nov 19th 2008
Month/Day/Year (YYYY)3. Source of water supply (Check one) (well) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township 48 N, Range 4-W, Section 8,
NW 1/4 of NW 1/4, or Govt. Lot 4 BM. County of KOOTENAI;Parcel (PIN) no. 48N-4W-08-3500Additional 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.

D-0013354 ... WELL completed 2000 and
connected to home under construction; completed 2008

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 12-31 amount 0.05
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.05 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 + 50 evergreens

SCANNED
MAR 15 2010

9. Location of Place of Use is: Township 48N, Range 4-W, Section 8,

NW 1/4 of NW 1/4, Govt. Lot 4 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) Samy V. Maller Date: 3-12-10

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 _____

Address _____

Date _____

Last Name _____ Identification No. _____

ANNED
MAR 15 2010

RECEIVED

8/7/00

Form 238
11/97

JUL 19 2000

IDAHO DEPARTMENT OF WATER RESOURCES

IDWR/North

WELL DRILLER'S REPORT

1. WELL TAG NO. D 0013354

DRILLING PERMIT NO. _____

Other IDWR No. 765008

2. OWNER:

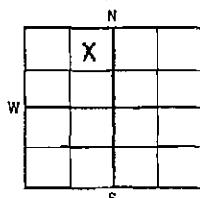
Name James Matteucci

Address 2039 Donovan Ct.

City San Jose State CA Zip 95125

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 48 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 8 1/4 NE 1/4 NW 1/4
 Gov't Lot _____ County Kootenai
 Lat. : : Long. : :

Address of Well Site

16244 Grayson Way City Coeur d'Alene

Lt. _____ Blk. _____ 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	19	200#	pumped

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	19	250	Steel	☒	☐	☐	☐
4"	5	175	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method saw cut 1/8 x 5

Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
155	175	1/8	60		PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

67 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

48N 4W 8

FORWARD WHITE COPY TO WATER RESOURCES

Office Use Only

Inspected by _____

Twp _____ Rge _____ Sec _____

1/4 1/4 1/4

Lat. : : Long. : :

11. WELL TESTS:

☐ Pump ☐ Bailer☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
20-25			8 hrs.

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encounter 147'

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8"	0	2	Clay, tan w/boulders		x
	2	4	Clay, brown w/broken rock		x
	4	7	Shale, tan, decomposed		x
	7	13	Shale, grey, med to soft		x
	13	19	Shale, tan, med to soft w/ mica		x
	19	26	Shale, grey w/blk lenses		x
	26	67	Shale, drk grey w/tan lenses soft		x
	67	115	Shale, black rose w/tan lens		x
	115	147	Shale, grey frac w/quartz & feldspar 1 gpm	x	x
	147	159	Shale, grey, hard		x
	159	166	Shale, drk grey green, brkn 4 gpm	x	
	166	187	Shale, drk grey, rose w/quartz lenses, brkn, hard 5 gpm		x
	187	205	Shale, grey w/black & white lenses 10 gpm		x
	205	225	Shale, grey, med		x

NOTE: Unable to keep bore
hole open at 175'. Broken
shale caving. No cap on liner.

RECEIVED

OCT 29 2000

Department of Water Resources

Completed Depth 175' (Measurable)
Date: Started 6/13/2000 Completed 6/16/2000

13. DRILLER'S CERTIFICATION

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

Company Name McCarty Drilling & Pump Inc 586 Firm No. _____

Firm Official *Scott McCarty* Date 7-2-2000

and

Driller or Operator _____ Date _____

(Sign once if Firm Official & Operator)

MATTEUCCI PIN 48N04W-08-3500

