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AUG 28 2017

Form No. 42-1409-2 (Internet 3/12)

IDWR / NORTH

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

ID Number: 45-17362

Date Received: 8-28-2017

Receipt No: N032894

Amount: 25.00 By: _____

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

Please type or print clearly

1. Name of claimant(s) MICHAEL O. AND/OR LESLIE L TREMBLAY Phone 208-687-4274
Mailing address 211 W BRUNNER RD ATHOL ID 83801
Street or Box City State ZIP
2. Date of priority (only one (1) per claim) 11/26/2008
Month/Day/Year (yyyy)
3. Source of water supply (check one) Ground Water (x) or Other () (a) _____
which is tributary to (b) _____
4. Location of point of diversion is: Township 53N, Range 04W, Section 26,
SE 1/4 of SE 1/4, or Govt. Lot _____, B.M., County of KOOTENAI
Parcel (PIN) no. 53N04W269350
Additional points of diversion, if any: _____
If available, GPS coordinates LAT 47:54:18 LONG 116:47:19
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 WITH PIPELINE TO 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 0.04
Month/Day Month/Day cfs (x) AFY ()
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed 0.04 cfs (x) or AFY ()
8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): DOMESTIC USE FOR ONE HOME

9. Location of place of use is: Township 53N, Range 04W, Section 26, SE 1/4 of SE 1/4,
or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) KOOTENAI

For (check one) Domestic (x) 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 (x) No ()

If your 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 (x)

13. Remarks:

14. Basis of claim (check one) Beneficial Use (x) 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 (x) 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) Michael O Tremblay Date: 8-25-17

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 _____

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Location Corrected by IDWR To:
T53N R04W Sec. 26 SWSESE
By: mciscell 2013-10-03

1. WELL TAG NO. D0056526

DRILLING PERMIT N

Other IDWR No

2. OWNER:

Name **Mike Dod**

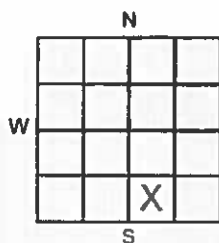
Address 9085 N Torrey Lane

City Hayden

State ID

Zip 83835

3. LOCATION OF WELL by legal description:



Twp 53N North ☒ or South ☐

Rge 03W East ☐ or West ☒

Sec 25 1/4 SW 1/4 SE 1/4

10 Ac 40 Ac 160 Ac

Gov't Lot County Kootenai

Lat 47:54:18 Long 116:47:19

Address of Well Site: (see next line)

brunner

City Athol

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	0	20	12 SACKS	DRY POOR

Drive Shoe Used? ☒ Y ☐ N Shoe Depth(s) 420 RING

Drive Shoe Seal Tested? ☐ Y ☒ N How?

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6	+2	420	0.250	STEEL	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length Headpipe N/A Length Tailpipe N/A

9. PERFORATIONS/SCREENS

☐ Perforations? Method

☐ Screens? Screen Type n/a

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

390 ft. below ground. Artesian pressure 0 lb.

Depth flow encountered 390 ft. Describe access port or control devices: cap welded

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
20 gpm est	n/a	420	2hrs

Water Temp. cold Bottom hole temp. cold

Water Quality test or comments: (below) Depth first Water Encountered 390

clear

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Remarks: Lithology, Water Quality and Temperature				Water
20	SAND GRAVEL	☐	☒	
260	SAND GRAVEL COBLES	☐	☒	
260 350	GRAVEL WITH BOLDERS	☐	☒	
8 350 420	LARGE BOLDERS WITH 3/4 MIX	☒	☐	

RECEIVED

JAN 20 2009

IDWR/North

Completed Dept 420 (Measurable)

Date: Started 11/21/2008 Completed 11/26/2008

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

Timothy R. Volking

Date 12/23/2008

Supervisor or Operator Timothy R. Volking

Date 12/23/2008

53N 03W 25