

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 95-13864Date Received: 09/14/2009Receipt No: N022090Received By: lm

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) Donald J. ^{OR} Kelly A. Brown Phone 208 772-0825

Mailing Address 20587 N Lester Ct. Athol ID Zip 83801
Street or Box City State

2. Date of Priority: (Only one per claim) 6/21/2006
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 52 N., Range 3 W., Section 18,
NW 1/4 of NW 1/4, or Govt. Lot 1 BM. County of Kootenai;

Parcel (PIN) no. 0-1298-001-003-0

Additional points of diversion if any: N/A

If 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.

Tag # 0044958
Well completed 6/21/2006, connected to 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 (X) 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

SEARCHED

SEP 14 2009

9. Location of Place of Use is: Township 52N., Range 3W, Section 18,

NW 1/4 of NW 1/4, Govt. Lot 1 BM. Parcel (PIN) no. Kootenai
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, County

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:

Home built by prior owner before 2006.

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) Donald J. Brown Date: 9/14/09
Kelly A. Brown Date: 9/14/09

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. 95-13864

COANNED
SEP 14 2009

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp. _____	Rge. _____	Sec. _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____		Long: _____	

1. WELL TAG NO. D 0044958
 DRILLING PERMIT NO. 840391
 Water Right or Injection Well No. _____

2. OWNER:
 Name Roger Willcutt
 Address 20580 N. Lester Court.
 City Athol State ID Zip 83801

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 52 North ☒ or South ☐
 Rge. 3 East ☐ or West ☒
 Sec. 18 NW 1/4 NW 1/4 NW 1/4
 Gov't Lot _____ County Kootenai
 Lat: _____ Long: _____
 Address of Well Site 20580 N. Lester Court
 City Athol
 (Give at least name of road - Distance to Road or Landmark)
 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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>20</u>	<u>75 Sacks</u>	<u>Overhead</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) Ring 120'
 Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6</u>	<u>+1</u>	<u>120</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐

Length of Headpipe N/A Length of Tailpipe _____
 Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method N/A
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
					<u>N/A</u>	☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
				<u>N/A</u>

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

12. WELL TESTS:

☐ Pump	☐ Bailer	☒ Air	☐ Flowing Artesian
Yield gal/min. <u>35</u>	Drawdown _____	Pumping Level _____	Time <u>4 Hours</u>

Water Temp. _____ Bottom hole temp. _____
 Water Quality test or comments: pump without Pulling
Down Static, until clean Depth first Water Encounter 85

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
<u>10</u>	<u>0</u>	<u>20</u>	<u>GRAVEL</u>	☒
<u>8</u>	<u>20</u>	<u>85</u>	<u>GRAVEL</u>	☒
<u>8</u>	<u>85</u>	<u>120</u>	<u>GRAVELY with water</u>	☒

14. DRILLER'S CERTIFICATION

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

Company Name Horsley Drilling Inc. Firm No. 632

Principal Driller Mark Horsley Date 6-21-06

and Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

95-13864 SEP 14 2009

RECEIVED
 JUN 22 2006
 IDWR/North

DALE 95-7634 PIN 0-1298-001-003-0



95-13864
SCANNED
SEP 14 2009