

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 95-14013Date Received: 4-16-09Receipt No: N022107AReceived By: ED

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) CLIFTON L Kelly Phone (208) 687-6977

Mailing Address 12473 W. BIGGS RD. RATHBURN ID. Zip 83858
Street or Box City State

2. Date of Priority: (Only one per claim) 8/23/90
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 5W, Section 34,
NW 1/4 of NW 1/4, or Govt. Lot _____ BM. County of KOOTENAI;
Parcel (PIN) no. 62N05W343500

Additional points of diversion if any: _____

If available, GPS coordinates: _____

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.

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 0.04 cfs ☒ or AFY ()

For STOCKWATER purposes from 1-1 to 12-31 amount 0.02

7. Total Quantity claimed 0.04 cfs ☒ or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 HOME 20 SHEEP

SCANNED

SEP 16 2009

9. Location of Place of Use is: Township 52 N, Range 5 W, Section 34,
NW 1/4 of NW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 52NDSW343500
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.

95-2072 or None ()

13. Remarks:

IRRIGATION OF 2 AC. NELSON CANYON CREEK

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) Clifton L. Kelly Date: 9-16-09

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. _____

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SEP 16 2009

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OR
BALLPOINT PEN

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 CHIP KELLY
Address W. 4500 HIDDEN VALLEY RD
RATHDRUM, ID 83858
Owner's Permit No. 95-90-N-90

7. WATER LEVEL

Static water level 100 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ °F. Quality GOOD
Describe artesian or temperature zones below

2. NATURE OF WORK

- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
-
- ☐
- Well diameter increase
-
- ☐
- Abandoned (describe abandonment procedures such as
-
- materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>6 ESTIMATED</u>	<u>580</u>	<u>1 HR</u>

3. PROPOSED USE

- ☒
- Domestic
- ☐
- Irrigation
- ☐
- Test
- ☐
- Municipal
-
- ☐
- Industrial
- ☐
- Stock
- ☐
- Waste Disposal or Injection
-
- ☐
- Other _____ (specify type)

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
8	0	20	CLAY & DECOMPOSED GRANIT		X
6	20	300	SOFT GRANITE	X	
6	300	410	SOFT GRANITE	X	
6	410	580	HARD BROKEN BRANITE	X	

4. METHOD DRILLED

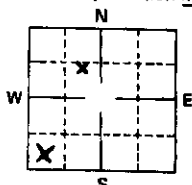
- ☒
- Rotary
- ☒
- Air
- ☐
- Hydraulic
- ☐
- Reverse rotary
-
- ☐
- Cable
- ☐
- Dug
- ☐
- Other _____

5. WELL CONSTRUCTION

Casing schedule: ☐ Steel ☒ Concrete ☐ Other _____
Thickness Diameter From To
.250 inches 6 inches + 1 feet 20 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feetWas casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? PVC ☒ Yes ☐ No DRILL
How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun
Size of perforation 1/8 inches by 1/8 inchesNumber From To
200 perforations XXX 550 feet 680 XXX feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feetWell 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 _____ feetGravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feetSurface seal depth 20 Material used as seal: ☐ Cement grout
☒ Bentonite ☐ Puddling clay ☒ CLAYSealing procedure used: ☐ Slurry pit ☐ Temp. surface casing
☒ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent
Weld☐ Cemented between strata

Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.Subdivision No. MICROFILMED

Lot No. _____ Block No. _____

County KOOTENAI 52N 5WN 1/4 NW 1/4 NW 1/4 Sec. 34 T. 52N S. 5W W. 5W

10.

Work started 8/20/90 finished 8/23/90

11. 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. No. 414Address P.O. BOX 2499 Date 8/23/90COVER D'ALENE ID 83814Signed by (Firm Official) [Signature]

and

(Operator) Tim Volking