

# 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 95-14317Date Received: 10/7/2009Receipt No: N022380Received By: Jm

## 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) STEVEN W. SYRLE Phone (20) 664-1905Mailing Address 3712 S. STACH ROAD CDA City ID State 83814  
Street or Box City State Zip2. Date of Priority: (Only one per claim) NOVEMBER 30, 1998  
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 50N, Range 04W, Section 19,  
SE 1/4 of SW 1/4, or Govt. Lot \_\_\_\_\_ BM. County of KOOTENAI;Parcel (PIN) no. 126235Additional 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.

DOO5666  
WELL TO 3000 GALLON UNDERGROUND RESERVOIR TO  
SINGLE FAMILY RESIDENCE. WELL IS 320' DEEP PER WELL LOG

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  
Month/Day Month/Day cfs(X) or AFY( )

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

7. Total Quantity claimed 0.04 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) DOMESTIC, 1 HOME

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9. Location of Place of Use is: Township SUN, Range 04W, Section 19,

SE 1/4 of SW 1/4, Govt. Lot \_\_\_\_\_ BM. Parcel (PIN) no. 5

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:

PROPERTY TAX PARCEL BOUNDARY SHOWN ON  
MAP IS INCORRECT ALONG WEST SIDE

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: 3 <sup>SWS</sup> -WELL LOG, MAP

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) [Signature] Date: 8/21/09

\_\_\_\_\_  
Date: \_\_\_\_\_

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

\_\_\_\_\_  
Title of \_\_\_\_\_ Organization

that I have signed the foregoing document in the space below as

\_\_\_\_\_  
Title of \_\_\_\_\_ 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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## IDAHO DEPARTMENT OF WATER RESOURCES

RECEIVED  
77876  
DEC 10 1998  
IDWR North  
WELL DRILLER'S REPORT

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

## 1. WELL TAG NO. D5666

Drilling Permit No: 95-98-N-216

Other IDWR No.

## 2. OWNER

Name HANKS, LEO

Well Number:

816

Address 7685 STACK RD

City CDA State ID Zip 83814

## 3. LOCATION OF WELL by legal description

sketch map location must agree with written location

|   |   |  |  |
|---|---|--|--|
| N |   |  |  |
|   |   |  |  |
|   |   |  |  |
|   | X |  |  |
|   |   |  |  |
| S |   |  |  |

Twp. 50 ☒ North or ☐ SouthRge. 04 ☐ East or ☒ West

E Sec. 19 1/4 SE 1/4 SW 1/4

Gov't Lot County KOOTENAI

Lat: : : Long: : :

Address of Well Site COUGAR GULCH

City CDA

(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/FILTER PACK |      |    | AMOUNT          | METHOD |
|------------------|------|----|-----------------|--------|
| Material         | From | To | Sacks or Pounds |        |
| BENTONITE        | 0    | 19 | 8 SACKS         | DRY    |
|                  |      |    |                 |        |
|                  |      |    |                 |        |

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 19Was drive shoe seal tested? ☐ Y ☐ N How?

## 8. CASING/LINER:

| Diameter | From | To   | Gauge | Material | Casing                              | Liner                               | Welded                              | Threaded                 |
|----------|------|------|-------|----------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 6        | +1   | -19  | .250  | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4        | -5   | -315 | .160  | PVC      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Length of Headpipe Length of Tailpipe

## 9. PERFORATIONS/SCREENS

- ☒ Perforations Method SKILLSAW

- ☐ Screens Screen Type

| From | To   | Slot Size | Number | Diameter | Material | Casing                   | Liner                               |
|------|------|-----------|--------|----------|----------|--------------------------|-------------------------------------|
| -280 | -320 | 1/8X6     | 84     | 4        | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

## 10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

160 ft. below ground Artesian pressure lb.

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

## 11. WELL TESTS:

- ☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
| 20              |          |               |      |
|                 |          |               |      |
|                 |          |               |      |

Water Temp. Bottom Hole Temp

Water Quality test or comments:

Depth first Water encountered 170

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

|           |      |     |                                                | Water                               |                                     |
|-----------|------|-----|------------------------------------------------|-------------------------------------|-------------------------------------|
| Bore Diam | From | To  | Remarks: Lithology, Water Quality, Temperature | Y                                   | N                                   |
| 8         | 0    | 5   | Topsoil                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 8         | 5    | 19  | Granite Brown Soft                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6         | 19   | 100 | Granite Brown Soft                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6         | 100  | 160 | Granite Gray Medium                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6         | 160  | 180 | Granite Gray Medium to Soft 4 gpm              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 6         | 180  | 230 | Granite Gray Medium                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6         | 230  | 300 | Granite Dark Gray Medium                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6         | 300  | 320 | Granite Gray                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|           | 0    | 0   | Shale Trap set at 120'                         | <input type="checkbox"/>            | <input type="checkbox"/>            |

Completed Depth 320' (Measurable)

Date: Started 11/30/98 Completed 11/30/98

## 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 H2O WellService, Inc. Firm No. 448

Firm Official John Whelan Date 11/30/98

and Supervisor or Operator Jim McLeslie Date 11/30/98

(Sign Once if Firm Official and Operator)

(Jim McLeslie)

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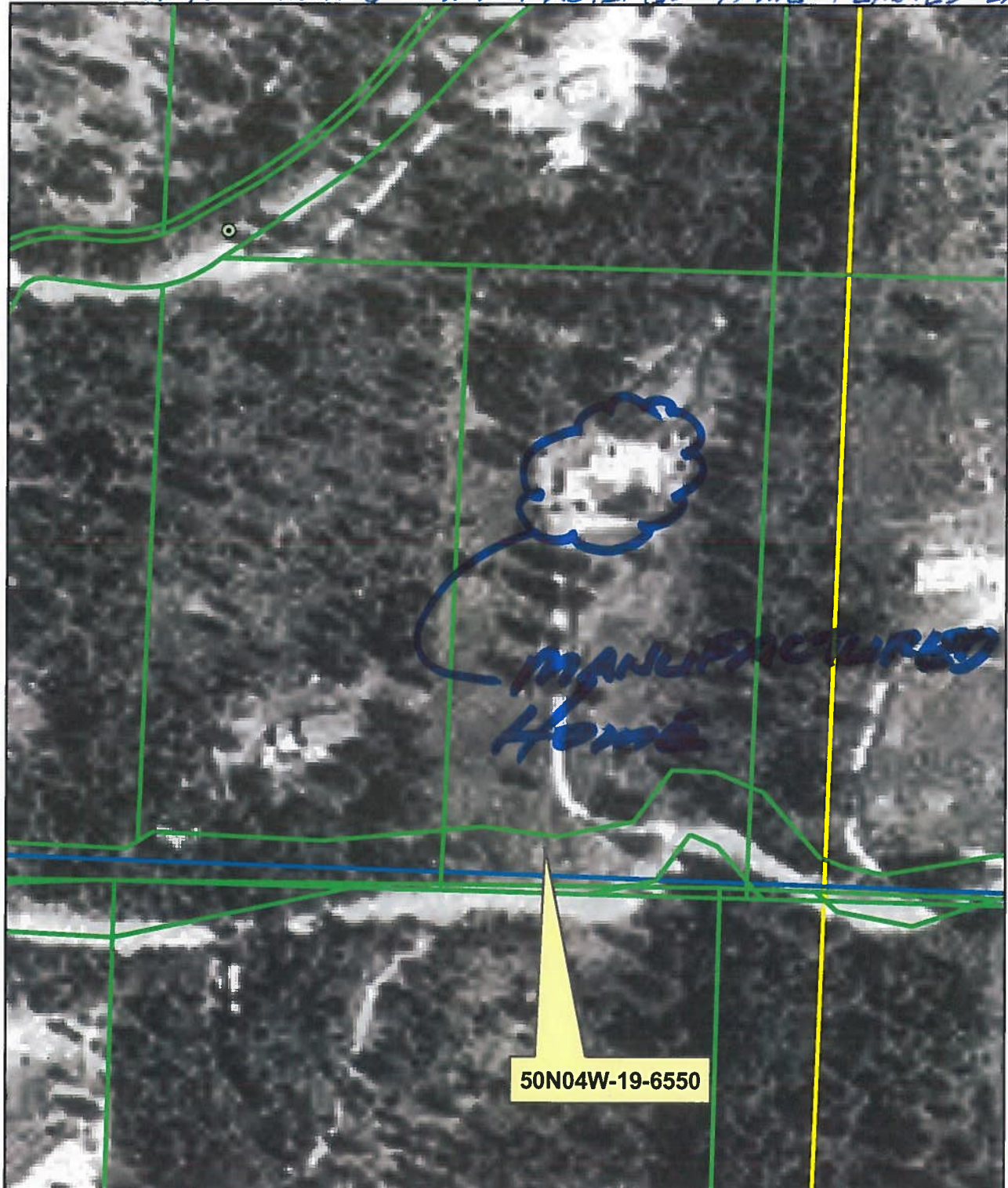
OCT - 7 2009

50N 4W 19

# SYRCLE PIN 50N04W-19-6550

MANUFACTURED HOME RECEIVED WATER FROM COMMUNITY WATER SYSTEM UNTIL WELL WAS DRILLED ON SITE IN 1998.

1992 PHOTO SHOWING MANUFACTURED HOME REMOVED LATE 2009



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# SYRCLE PIN 50N04W-19-6550

2009



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