

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 95-14331
Date Received: 10/8/2009
Receipt No: W022413A
Received By: dm

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

- Name of Claimant(s) Susan E. Dredge Phone (208) 691-6738
Mailing Address 7475 E. Yellowstone Trail, Coeur d'Alene, ID 83814
Street or Box City State Zip
- Date of Priority: (Only one per claim) 1/1/1990
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water ☒ or Other ☐ (a) Well
which is tributary to (b) _____
- Location of Point of Diversion is: Township 50N, Range 3W, Section 34,
NW 1/4 of SW 1/4, or Govt. Lot 4 BM. County of Kootenai;
Parcel (PIN) no. 50N03W34-5400
Additional points of diversion if any: _____
If available, GPS coordinates: _____
- 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.
700' Deep Well with Pump, completed 7/1989
P.# 95-89-N-35; Connected to home 1990.
- 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 _____
- Total Quantity claimed .04 cfs ☒ or AFY ()
- Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;
Stockwater and Number of livestock) Domestic; One Household

SCANNED
OCT - 9 2009

9. Location of Place of Use is: Township 50N, Range 3W, Section 34,
NW 1/4 of SW 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 _____

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: 1-Map, 1-Well Report

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: 10/8/09

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. _____

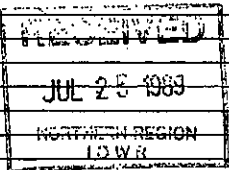
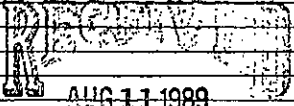
SCANNED

OCT - 9 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 <u>Neil Dredge</u> Address <u>1111 Sherman Ave.</u> <u>Coeur d' Alene, Idaho 83814</u> Owner's Permit No. <u>25-89-11-25</u>		7. WATER LEVEL Static water level <u>250</u> 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 <u>good</u> <i>Describe artesian or temperature zones below.</i>																																															
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____																																															
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		<table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>23 gpm</u></td><td></td><td></td></tr><tr><td><u>estimated</u></td><td><u>700</u></td><td><u>1 hr</u></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>23 gpm</u>			<u>estimated</u>	<u>700</u>	<u>1 hr</u>																																					
Discharge G.P.M.	Pumping Level	Hours Pumped																																															
<u>23 gpm</u>																																																	
<u>estimated</u>	<u>700</u>	<u>1 hr</u>																																															
4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>4</td><td>brown clay</td><td></td><td>X</td></tr><tr><td></td><td>4</td><td>18</td><td>broken basalt</td><td></td><td>X</td></tr><tr><td></td><td>18</td><td>210</td><td>basalt</td><td></td><td>X</td></tr><tr><td></td><td>210</td><td>357</td><td>clay brown</td><td></td><td>X</td></tr><tr><td>6</td><td>357</td><td>525</td><td>broken basalt</td><td>X</td><td></td></tr><tr><td></td><td>525</td><td>700</td><td>soft shale</td><td>X</td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	4	brown clay		X		4	18	broken basalt		X		18	210	basalt		X		210	357	clay brown		X	6	357	525	broken basalt	X			525	700	soft shale	X	
Bore Diam.	Depth		Material		Water																																												
	From	To		Yes	No																																												
8	0	4	brown clay		X																																												
	4	18	broken basalt		X																																												
	18	210	basalt		X																																												
	210	357	clay brown		X																																												
6	357	525	broken basalt	X																																													
	525	700	soft shale	X																																													
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ inches Diameter _____ inches From _____ feet To _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☒ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well 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 _____ feet Gravel packed? ☐ Yes ☐ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>20</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☒ Clay Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port _____		  Department of Water Resources																																															
6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. N W E Subdivision Name _____ Lot No. <u>2/10th St</u> Block No. _____ County <u>Kootenai</u> _____ 1/4 _____ 1/4 Sec. <u>34</u> , T. <u>50N</u> , R. <u>3E</u>		10. Work started <u>7/17/89</u> finished <u>7/20/89</u>																																															
11. DRILLERS CERTIFICATION <u>22</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>United Drilling Inc</u> Firm No. <u>414</u> P.O. Box <u>2499</u> Address <u>Coeur d' Alene, Id</u> Date <u>7/25/89</u> Signed by (Firm Official) <u>Eldon Dahl</u> and (Operator) <u>Tim Volking</u>																																																	

DREDGE PIN 50N03W-34-5400

