

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 95-14077Date Received: 3-7-11

Receipt No: _____

Received By: 402682-ern

OCT 12 2010

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

IDWR/NORTHERN

1. Name of Claimant(s) Richard Warnick & Sandra Luke Phone (480) 951 0401Mailing Address 4601 E Desert Park Place Paradise Valley AZ Zip 85253
Street or Box City State2. Date of Priority: (Only one per claim) 06/01/1962
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 48N, Range 4W, Section 19
SW 1/4 of SW 1/4, or Govt. Lot 5 BM. County of KootenaiParcel (PIN) no. 08620-000-001-0Additional points of diversion if any: NAIf available, GPS coordinates: NA5. 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 01/01 to 12/31 amount 204 cfs (✓) or AFY ()
Month/Day Month/Day

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 204 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 homeSCANNED
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9. Location of Place of Use is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. same

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.

Lake claim 95-4126 or None ()

13. Remarks:

14. Basis of Claim (Check One) Beneficial Use () Posted Notice () License (✓) Permit () Decree ()

statutory claim

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-4126

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) _____

Date: 9/29/10

Date: 9/29/10

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 _____

Last Name _____ Identification No. _____

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Jul. 2. 2007 4:15PM IDAHO DEPT OF WATER RESOURCES

Form 228-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0040051
DRILLING PERMIT NO. P32744
Water Right or Injection Well No.

2. OWNER: Bill Matson
Name: Bill Matson
Address: 13603 S. Valley Channel Rd.
City: Valley Ford State: WA 99026

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub or Direction to well.

Top: 40 North 10 or South 10
Rgn: 14 East 10 or West 10
Sec: 14 14 14 14 14 14
Gov't Lot: County: Ada

Lat: Long: 20542 S. West Point Rd.
Address of Well Site: City: Worley ID

Blk: Sub Name

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK check all that apply

☒ New Well ☐ Modify ☐ Abandonment ☐ Other (Replacement etc.)

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

Seal Material	From	To	Height/Volume	Seal Placement Method
Bentonite	0	35	9.5K	Pack around pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s): 20'

Was drive shoe seal turned? ☒ Y ☐ N How? Air

8. CASING/LINER:

Outer Pipe	Inner Pipe	To	Couple	Material	Casing	Line	Wells	Thru
6"	4"	-20	250	Steel	☒	☐	☐	☐
4"	-15	-23	160	PVC	☐	☒	☐	☐

Length of Hecpipe: Length of Tailpipe:

Padlock ☐ Y ☐ N Type

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method: Skill Saw

Screen Type & Method of Installation:

From	To	Slot Size	Number	Diameter	Material	Casing	Line
-63	-123	40"	40	4"	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Height/Volume	Placement Method
20/40				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

46 ft. below ground Artesian pressure: ft.
Depth flow encountered: 62 ft. Describe the access port or control device: well cap

4KN 4W 19

12. WELL TESTS:

Well test type	Drawdown	Pumping Level	Time
30 gpm	12.3'	12.3'	

Water Temp: 48° Bottom hole temp:

Water Quality test or comments: Slightly Turbid

Depth First Water Encounter: 6.5

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Depth (ft.)	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
0	43		Clay - Tan / Basalt		
43	62		Basalt - Broken w/ clay		
62	80		Basalt - Broken w/ water		
80	103		Basalt - Broken w/ water		
103			30 gpm		

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IDAHO DEPT OF WATER RESOURCES

Completed Depth: 123 (Measurable)

Date: Started 4-20-05 Completed 4-21-05

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: Action Drilling Inc. Firm No. 610

Principal Driller: Alvin Carri Date: 5-17-05

Driller or Operator II: Date:

Operator I: Alvin Carri Date: 5-17-05

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

FORWARD WHITE COPY TO WATER RESOURCES

JUL 02 2007 17:24

READ AND APPROVED

PAGE: 01

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September 29, 2010

Mr. Shaun Maxey
Northern Region
Idaho Department of Water Resources
7600 Mineral Drive, Suite 100
Coeur d'Alene, ID 83815-7763

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OCT - 8 2010
IDWR/NORTHERN

Re: Water Rights Claim
Property address - 20542 S West Point Rd., Worley, ID 83876

Dear Mr. Maxey,

Thank you for taking the time to help me fill out this claim. I was able to find the additional information on well driller's report.

If you have any questions, please call me at the office at 62-955-9393, ext. 5.

And again, thank you for your help.

Sincerely,



Sandy Luke
4601 E. Desert Park Place
Paradise Valley, AZ 85253
480-951-0401 (home)
602-955-9393 ext 5. (work)

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