

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 95-14107Date Received: 9-2-09Receipt No: ND21955Received By: Wm **RECEIVED**

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

SEP - 2 2009

IDWR/North

1. Name of Claimant(s) Stephen & Karen Kraft Phone (509) 465-1980Mailing Address 1311 W. MAXINE CT. SPOKANE, WA Zip 99208
Street or Box City State2. Date of Priority: (Only one per claim) Oct. 5, 1992
Aug 31, 2009
Month/Day/Year (YYY)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 51, Range 3 West, Section 3,
NW 1/4 of NE 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. _____

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.

Well, Pump, Cistern

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from Jan 1 to Dec 31 amount .0082
Month/Day Month/Day cfs () or AFY ()For _____ purposes from _____ to _____ amount _____
.02 → 3 households = .008/household7. Total Quantity claimed .0082 cfs () or AFY ()

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

Stockwater and Number of livestock) Domestic: 3 households

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10 - block 3, 2nd Addition to McCauley Plats Plat recorded in Book D, p 109
Records of Kootenai County

9. Location of Place of Use is: Township _____, Range _____, Section _____
_____ 1/4 of _____ 1/4, Govt. Lot _____ 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 * 7291 E. Revilo Pt. Rd., Hayden, Idaho 83835

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 (X)

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 (X)
John & Nancy Wagner Ph: (509) 353-1470

13. Remarks: Well is shared with two other families. Cistern capacity = 3,000 gal
Pump generates 11 gpm or 660 gal/hour. Attachment: Well Driller's Report

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

Court _____ Decree Date _____ Plaintiff v. Defendant # 95-92-206 H₂O Well Service
10/5/92

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: _____

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: 8/31/09

_____ Date: 8/31/09

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 _____ Date _____

Address _____

Last Name _____ Identification No. _____

RECORDED
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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE
BALLState 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>JOHN MAGNUSON</u> Address <u>4207 E. 15th</u> Drilling Permit No. <u>915-92-N-206</u> Water Right Permit No. _____		7. WATER LEVEL Static water level <u>65</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 _____ of. Quality _____ 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 _____ <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>15</u></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>15</u>																																																
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		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 rowspan="2">Wells Yes if</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>6</td><td>Sandy loam Tan</td><td></td></tr><tr><td>8</td><td>6</td><td>60</td><td>Granite Decomp Tan Soft</td><td></td></tr><tr><td>6</td><td>60</td><td>96</td><td>Granite Decomp Tan Soft</td><td></td></tr><tr><td>6</td><td>96</td><td>100</td><td>Granite Decomp Slt & pepper w/ water Apr 2 gpm</td><td>X</td></tr><tr><td>6</td><td>100</td><td>135</td><td>Granite silt & pepper / Brown</td><td></td></tr><tr><td>6</td><td>135</td><td>142</td><td>Granite Green Broken / water Apr 8 gpm</td><td>X</td></tr><tr><td>6</td><td>135</td><td>163</td><td>Granite Silt & pepper / Rose Mat</td><td></td></tr><tr><td>6</td><td>163</td><td>200</td><td>Granite silt & pepper Med</td><td></td></tr><tr><td colspan="5">Installed 188" of 4" PVC</td></tr></tbody></table>		Bore Diam.	Depth		Material	Wells Yes if	From	To	8	0	6	Sandy loam Tan		8	6	60	Granite Decomp Tan Soft		6	60	96	Granite Decomp Tan Soft		6	96	100	Granite Decomp Slt & pepper w/ water Apr 2 gpm	X	6	100	135	Granite silt & pepper / Brown		6	135	142	Granite Green Broken / water Apr 8 gpm	X	6	135	163	Granite Silt & pepper / Rose Mat		6	163	200	Granite silt & pepper Med		Installed 188" of 4" PVC				
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____																																																							
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness Diameter From To <u>250</u> inches <u>6</u> inches + <u>2</u> feet <u>59</u> 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? <u>PVC</u> ☒ Yes ☐ No <u>SKILL SAW</u> How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches Number From To <u>90</u> perforations <u>160</u> feet <u>200</u> 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>60</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☒ Pudding 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 excess port _____																																																							
6. LOCATION OF WELL Sketch map location must agree with written location. <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td>X</td><td></td><td></td></tr><tr><td>W</td><td></td><td>3</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td><td></td><td></td></tr></table> County <u>Kootenai</u> Subdivision Name _____ Lot No. _____ Block No. _____ NW 1/4 NE 1/4 Sec. <u>3</u> T. <u>5</u> N. R. <u>3</u> E. <u>1</u>		N							X			W		3		E																S					11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H2O Well Svc. Firm No. 448</u> Address <u>Hayden W. Id</u> Date <u>10-5-92</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>																		
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muddy tractor
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USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

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