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**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 95-14112Date Received: 4/2/10Receipt No: N023973Received By: [Signature]**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) Travis and Ginen Bertum Phone (208) 667-6731Mailing Address 8585 Haystack Lane Coeur d'Alene ID Zip 83814
Street or Box City State2. Date of Priority: (Only one per claim) ~~03-31-2010~~ 03-19-2003
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 50N, Range 04W, Section 20,
NW 1/4 of _____ 1/4, or Govt. Lot _____ BM. County of _____;Parcel (PIN) no. 0-5507-001-008-0

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.

No additional wells

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

For Irrigation purposes from 05-01 to 09-01 amount ~~1.02~~ .02 cfs (X) or AFY ()For Household Domestic purposes from 01-01 to 12-31 amount ~~300~~ .027. Total Quantity claimed .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 Home 1 - Irrigation garden

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9. Location of Place of Use is: Township 50 N, Range 04 W, Section 20
NW 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

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: _____

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: 03-31-2010

[Signature] Date: 03-31-2010

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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Form 238-7

11/MAR 24 2003

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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

IDWR/North

1. WELL TAG NO. D0028177

DRILLING PERMIT N 793941

Other IDWR No _____

2. OWNER:

Name Travis Bertram

Address 2900 N Government Way PMB # 232

City Coeur d'Alene State ID Zip 83815-37

3. LOCATION OF WELL by legal description:

N		Twp 50N	North ☒ or South ☐
W		Rge 04W	East ☐ or West ☒
E		Sec 20	1/4 NW 1/4 SE 1/4
S		Gov't Lot _____	County Kootenai
		Lat _____	Long _____

Address of Well Site: (see next line)

Haystack Road off of Meadowbrook

City _____

Lot _____ Blk _____ Sub. Name (see next line)

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/Lbs	
Bentonite				
Granules	0	47	8 Sacks	Dry Pour

Drive Shoe Used? ☒ Y ☐ N Shoe Depth(s) 425Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
8	+1	47	0.322	Steel	☒	☐	☒	☐
6	+1	425	0.250	Steel	☒	☐	☒	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations? Method _____☐ Screens? Screen Type _____

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

90 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 425 ft. Describe access port or

control devices: Steel Cap Welded

11. WELL TESTS:

- ☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
12	100%	420	2 Hours

Water Temp. _____ Cold Bottom hole temp. _____ Cold

Water Quality test or comments: (below) Depth first Water Encountered 48

Clear

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Lithology, Water Quality and Temperature	Remarks:	Wat Y
10	0	2	Topsoil		☐
10	2	41	Clay		☐
10	41	47	Basalt with Clay		☐
8	47	130	Basalt 3GPM (Cased Off)		☒
8	130	193	Clay - Black		☐
8	193	207	Clay - Grey		☐
8	207	219	Clay - Orange		☐
8	219	237	Clay - Grey with Granite Sand		☐
8	237	245	Granite - Decomposed - Soft		☐
8	245	415	Granite - Very Soft		☐
8	415	425	Granite Sand with Wood		☐
8	425	440	Granite - Very Soft 12 GPM		☒

Completed Depth 440 (Measurable)

Date: Started 3/10/03 Completed 3/19/03

13. 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.

Firm No 4

Firm Official and _____

Date 3/19/03

Supervisor or Operator Mark A. Penick

Date 3/19/03

50 N 4 W 20