

# 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 95-14115Date Received: 9-18-09Receipt No: N022198Received By: E.D.

## 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) Mike & Donna Leach Phone 208 687-5256Mailing Address 12300 Winch Ave Ratndrum ID Zip 83858  
Street or Box City State2. Date of Priority: (Only one per claim) 06/01/2001  
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 51N, Range 5W, Section 3,  
SE 1/4 of NW 1/4, or Govt. Lot — BM. County of Kootenai;Parcel (PIN) no. 51N05W-03-4500Additional points of diversion if any: NAIf available, GPS coordinates: NA

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.

D0017414 - well completed 2001. 1 pressure tank water line to 1 Home & 2 other buildings

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 .04 cfs( ) or AFY( )

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

7. 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) 1 House

SCANNED  
SEP 18 2009

9. Location of Place of Use is: Township 51N, Range 5W, Section 3,

SE 1/4 of NW 1/4, Govt. Lot — BM. Parcel (PIN) no. Same Pm

If different than shown in Item 4

for (Check One) **Domestic** (X) **Stock** ( ) **Domestic and Stock** ( )

Additional places of use, if any NA

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 (X) 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 (X)

13. Remarks:

14. Basis of Claim (Check One) **Beneficial Use** (X) **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 (X) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 3

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) Mr. [Signature]

Date: 9/18/09

Donna Leach

Date: 9/18/09

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 \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Last Name \_\_\_\_\_ Identification No. \_\_\_\_\_

SCANNED

SEP 18 2009

# LEACH PIN 51N05W-03-4500



RECEIVED  
AUG 10 2001IDAHO DEPARTMENT OF WATER RESOURCES  
WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0017414

DRILLING PERMIT N

Other IDWR No

2. OWNER:

Name Mike P Leach

Address P O Box 2634

City Coeur d'Alene

State ID

Zip 83814

3. LOCATION OF WELL by legal description:

|                                       |  |                 |       |        |        |       |
|---------------------------------------|--|-----------------|-------|--------|--------|-------|
| N                                     |  | Twp 51N         | North | ✓      | or     | South |
| Rge 05W                               |  | East            | or    | West   | ✓      |       |
| Sec 03                                |  | 1/4             | SE    | 1/4    | NW 1/4 |       |
| 10 Ac                                 |  | 40 Ac           |       | 160 Ac |        |       |
| Gov't Lot                             |  | County Kootenai |       |        |        |       |
| Lat                                   |  | Long            |       |        |        |       |
| Address of Well Site: (see next line) |  |                 |       |        |        |       |

Noth Idaho Rd to W Winch Ave, 3rd drive on right

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        | 0    | 18 | 8 sacks   | pour in |
|                  |      |    |           |         |
|                  |      |    |           |         |

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

8. CASING/LINER

| Diam | From | To  | Gauge | Material | Casng | Liner | Weld | Thrded |
|------|------|-----|-------|----------|-------|-------|------|--------|
| 6    | 2    | 158 | 0.250 | Steel    | ✓     | ✓     | ✓    | ✓      |
| 4    | 80   | 580 | 0.165 | PVC      | ✓     | ✓     | ✓    | ✓      |
|      |      |     |       |          |       |       |      |        |

Length Headpipe \_\_\_\_\_ Length Tailpipe \_\_\_\_\_

9. PERFORATIONS/SCREENS

Perforations? Method

☒ Screens? Screen Type PVC

| From | To  | Slot | Nmbr | Diam | Material | Casng | Liner |
|------|-----|------|------|------|----------|-------|-------|
| 540  | 560 | .020 |      | 4    | PVC      |       | ✓     |
| 500  | 520 | .020 |      | 4    | PVC      |       | ✓     |
|      |     |      |      |      |          |       |       |

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

190 ft. below ground. Artesian pressure \_\_\_\_\_ lb.

Depth flow encountered 400 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   |
|-----------------|----------|------------|--------|
| 25              | 100%     | 618        | 2 hrs. |
|                 |          |            |        |
|                 |          |            |        |

Water Temp. \_\_\_\_\_

cold

Bottom hole temp. \_\_\_\_\_

cold

Water Quality test or comments: (below) Depth first Water Encountered 400

clear, cold, no smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

| Bore Diam | From | To  | Remarks: Lithology, Water Quality and Temperature | Water |   |
|-----------|------|-----|---------------------------------------------------|-------|---|
|           |      |     |                                                   | Y     | N |
| 8         | 0    | 1   | Topsoil                                           |       | ✓ |
| 8         | 1    | 18  | Sand & gravel - fine                              |       | ✓ |
| 8         | 18   | 137 | Sand & gravel - fine                              |       | ✓ |
| 8         | 137  | 148 | Decomposed granite - broken                       |       | ✓ |
| 8         | 148  | 158 | Granite - black/white - hard                      |       | ✓ |
| 6         | 158  | 170 | Granite - black/white - hard                      |       | ✓ |
| 6         | 170  | 185 | Granite - purple/black/white - soft               |       | ✓ |
| 6         | 185  | 235 | Granite - purple/black/white - hard               |       | ✓ |
| 6         | 235  | 275 | Granite - purple/black/white-soft/broken          |       | ✓ |
| 6         | 275  | 400 | Granite - black/white - hard                      |       | ✓ |
| 6         | 400  | 410 | Granite - black/white-soft (1.5 gpm)              |       | ✓ |
| 6         | 410  | 510 | Granite - black/white - hard                      |       | ✓ |
| 6         | 510  | 545 | Granite - purple/black/white - medium             |       | ✓ |
| 6         | 545  | 555 | Granite - green/white - soft/broken               |       | ✓ |
| 6         | 555  | 560 | Granite - purple/black/white - soft               |       | ✓ |
| 6         | 560  | 570 | Granite - green/white-very broken (4 gpm)         |       | ✓ |
| 6         | 570  | 585 | Granite - purple/black/white - soft               |       | ✓ |
| 6         | 585  | 590 | Granite-green/white-very broken (20 gpm)          |       | ✓ |
| 6         | 590  | 605 | Granite - purple/black/white - soft               |       | ✓ |
| 6         | 605  | 620 | Granite - purple/black/white - medium             |       | ✓ |
|           |      |     |                                                   |       |   |
|           |      |     |                                                   |       |   |
|           |      |     | Liner stopped @ 580'                              |       |   |

RECEIVED

SEP 14 2001

Department of Water Resources

Completed Depth 580 (Measurable)

Date: Started 7/6/01 Completed 7/9/01

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 414

Name

Firm Official and

Date 7/10/01

Supervisor or Operator Jason C. Beckham

Date 7/10/01

FORWARD WHITE COPY TO WATER RESOURCES

417

Account Number: 650053989  
Michael P. Leach  
W 12300 WINCH RD  
RATHDRUM ID 83858

Open Date: 06-06-2001  
Close Date:  
Collection Action: JFMAMJJASOND  
000000000000

Credit Code: 3  
Bill Date: 08-24-2009  
Past Due Date: 09-10-2009  
Next Read Date: 09-21-2009  
Average Bill: 232  
Broken Arrangement Number: 0  
Pending Collection Date: N/A  
Pending Collection Action: N/A  
Account Balance: \$0.00  
Current: 0.00  
30 Days: 0.00  
60 Days: 0.00  
90 Days: 0.00  
120 Days: 0.00  
Last Payment: 09-03-2009  
Last Payment Amount: \$193.21cr  
Prior Obligation Amount: 0.00  
Writeoff Amount: