



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region, 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815

Phone: (208) 762-2800 • Fax: (208) 762-2819 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

January 29, 2014

Robert L. Ludka OR Sabrina L. Ludka
968 Granite Loop RD
Athol, ID 83801

Re: Coeur d'Alene-Spokane River Basin Adjudication Claim (CSRBA) Claims No. 95-16338

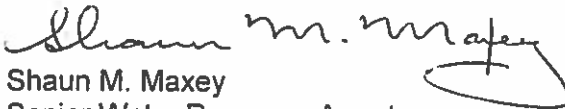
Dear Claimants:

Idaho Department of Water Resources (IDWR) records indicate that we received information you wish to change your original Claim's (95-16338) Priority Date to April, 20, 1985. A copy of the original Claim 95-16338 with the new date is enclosed.

Please review the enclosed Amended Claim and Well Driller's Report (96-85-N-44) that appears to be for your well. Please date and sign the Amended Claim and return the Amended Claim and Well Driller's Report to me at the address shown above.

My telephone number at the IDWR Northern Region Office is (208) 762.2816.

Respectfully,



Shaun M. Maxey
Senior Water Resource Agent
Idaho Department of Water Resources, Northern Region

Enclosures

Copy of CSRBA Claim 95-16338
Amended Claim 95-16388 for signature
Driller's Report 96-85-N-44

SCANNED

FEB 05 2014

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

ID Number: _____

Date Received: _____

Receipt No: _____

Amount: _____ By: _____

Amended Claim 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

Please type or print clearly

- Name of claimant(s) Robert L. Ludka OR Sabrina L. Ludka Phone (208) 691.0608
Mailing address 968 GRANITE LOOP RD ZIP 83801
Street or Box City State
- Date of priority (only one (1) per claim) 04.20.1985
Month/Day/Year (yyyy)
- Source of water supply (check one) Ground Water (x) or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 54N, Range R03W, Section 22,
NE 1/4 of SE 1/4, or Govt. Lot _____, B.M., County of BONNER
Parcel (PIN) no. RP54N03W227500A
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.
WELL 96-85-N-44 COMPLETED 4.20.1985 AND CONNECTED TO 1 HOME.
- 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 (x) AFY ()
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed .04 cfs (x) or AFY ()
- Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): 1 HOME

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FEB 05 2014

9. Location of place of use is: Township 54N, Range 03W, Section 22, NE 1/4 of SE 1/4, or Govt. Lot _____, B.M., 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? BONNER

11. Do you own the property listed above as place of use? Yes (☒) No (☐)

If your 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) _____ Date: _____

_____ 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 _____ Date _____

Address _____

SCANNED

FEB 05 2014

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>RONALD + ROBERTA NESS</u> Address <u>ROUTE 1 BOX 49A</u> Owner's Permit No. <u>ATHOL IDAHO 83801</u> <u>96-85-N-44</u>	7. WATER LEVEL Static water level <u>30</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 _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>3 1/2</u></td> <td><u>270</u></td> <td><u>1 hr.</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>3 1/2</u>	<u>270</u>	<u>1 hr.</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" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th rowspan="2">Water Yes No</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>8</u></td> <td><u>0</u></td> <td><u>2</u></td> <td><u>Brown Dirt</u></td> <td>☒</td> </tr> <tr> <td><u>8</u></td> <td><u>2</u></td> <td><u>8</u></td> <td><u>Clay</u></td> <td>☒</td> </tr> <tr> <td><u>8</u></td> <td><u>18</u></td> <td><u>18</u></td> <td><u>Uncompacted Gravel</u></td> <td>☒</td> </tr> <tr> <td><u>6</u></td> <td><u>18</u></td> <td><u>375</u></td> <td><u>BLACK + WHITE Gravel</u></td> <td>☒</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water Yes No	From	To	<u>8</u>	<u>0</u>	<u>2</u>	<u>Brown Dirt</u>	☒	<u>8</u>	<u>2</u>	<u>8</u>	<u>Clay</u>	☒	<u>8</u>	<u>18</u>	<u>18</u>	<u>Uncompacted Gravel</u>	☒	<u>6</u>	<u>18</u>	<u>375</u>	<u>BLACK + WHITE Gravel</u>	☒	
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	10. WORK STARTED Work started <u>4/19/65</u> finished <u>4/20/65</u>																												
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>210</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>20</u> feet</td> </tr> <tr> <td><u>125</u> inches</td> <td><u>4</u> inches</td> <td><u>10</u> feet</td> <td><u>725</u> feet</td> </tr> <tr> <td><u>PVC</u> inches</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☒ Yes ☐ No Perforated? <u>PVC</u> ☒ Yes ☒ No <u>Drill</u> How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation <u>1/16</u> inches by <u>1/16</u> inches <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>75</u> perforations</td> <td><u>765</u> feet</td> <td><u>365</u> feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> 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 ☒ Slurry pit ☐ Temp. surface casing Sealing procedure used: ☐ Slurry pit ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	<u>210</u> inches	<u>6</u> inches	<u>1</u> feet	<u>20</u> feet	<u>125</u> inches	<u>4</u> inches	<u>10</u> feet	<u>725</u> feet	<u>PVC</u> inches				Number	From	To	<u>75</u> perforations	<u>765</u> feet	<u>365</u> feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	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>United Drilling Firm No. 414</u> Address <u>Box 2499</u> Date <u>5/4/65</u> Signed by (Firm Official) <u>John R. Volking</u> and (Operator) <u>John R. Volking</u>
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6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. Subdivision Name _____ Lot No. _____ Block No. _____ County <u>BONNER</u> <u>NE</u> 1/4 <u>SE</u> 1/4 Sec. <u>22</u>, T. <u>54</u> N. R. <u>3</u> E. W.	12. RECEIVED JUN 25 1965 Department of Water Resources																												