

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 95-14553

Date Received: 10/27/9

Receipt No: ND 22607

Received 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) L. Heather Hossley Phone 208 772-9862

Mailing Address 5226 E. Dodd Rd Hayden Lake ID Zip 83835
Street or Box City State

2. Date of Priority: (Only one per claim) 3/23/1992
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) NA
which is tributary to (b) NA

4. Location of Point of Diversion is: Township 51N, Range 3W, Section 4,
NW 1/4 of NW 1/4, or Govt. Lot 4 BM. County of Kootenai;

Parcel (PIN) no. 51N03W-04-3050

Additional points of diversion if any: Second well 51N03W-04-3000

If 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.

95-91-N-156 Well completed 10/9/91. Connected to
D00017540 Both wells are connected to (1) home

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 stock water purposes from 01-01 to 12-31 amount .02

7. Total Quantity claimed .04 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) home 10 head mixed stock

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OCT 27 2009

9. Location of Place of Use is: Township 51N, Range 3W, Section 4,

NW 1/4 of NW 1/4, Govt. Lot 4 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 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 ☒ 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:

Power to D00017540) well not operating due to
low flow. (well 1 or 2?) is decommissioned

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: 4

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) Heather L. Hossly

Date: 10/27/2009

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 _____

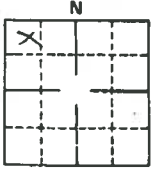
Address _____

Date _____

Last Name _____ Identification No. _____

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OCT 27 2009

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE BALLPOINT OR
BALLPOINT PENState 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>Allen Friesen</u> Address <u>Cole</u> Drilling Permit No. <u>95-91-N-156</u> Water Right Permit No. _____		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 _____ 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 _____																																																											
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		<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>2 1/2</u></td><td></td><td><u>1</u></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>2 1/2</u>		<u>1</u>																																																				
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		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 colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td><u>10</u></td><td><u>0</u></td><td><u>2</u></td><td><u>Top Soil</u></td><td></td><td><u>X</u></td></tr><tr><td><u>8</u></td><td><u>2</u></td><td><u>30</u></td><td><u>Clay</u></td><td></td><td><u>X</u></td></tr><tr><td><u>8</u></td><td><u>30</u></td><td><u>140</u></td><td><u>Basalt</u></td><td><u>+</u></td><td></td></tr><tr><td><u>6</u></td><td><u>140</u></td><td><u>215</u></td><td><u>Clay</u></td><td></td><td><u>+</u></td></tr><tr><td></td><td><u>215</u></td><td><u>235</u></td><td><u>Basalt</u></td><td></td><td><u>+</u></td></tr><tr><td></td><td><u>235</u></td><td><u>300</u></td><td><u>Clay Hard Bn</u></td><td></td><td><u>+</u></td></tr><tr><td></td><td><u>300</u></td><td><u>500</u></td><td><u>Clay</u></td><td></td><td><u>+</u></td></tr><tr><td colspan="6"><u>Backfilled to 140</u></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>10</u>	<u>0</u>	<u>2</u>	<u>Top Soil</u>		<u>X</u>	<u>8</u>	<u>2</u>	<u>30</u>	<u>Clay</u>		<u>X</u>	<u>8</u>	<u>30</u>	<u>140</u>	<u>Basalt</u>	<u>+</u>		<u>6</u>	<u>140</u>	<u>215</u>	<u>Clay</u>		<u>+</u>		<u>215</u>	<u>235</u>	<u>Basalt</u>		<u>+</u>		<u>235</u>	<u>300</u>	<u>Clay Hard Bn</u>		<u>+</u>		<u>300</u>	<u>500</u>	<u>Clay</u>		<u>+</u>	<u>Backfilled to 140</u>					
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5. WELL CONSTRUCTION Casing schedule: ☐ Steel ☐ Concrete ☒ Other <u>PVC 140'</u> Thickness _____ inches Diameter _____ inches From _____ feet To _____ 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? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ 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>30</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☒ Puddling clay ☒ Cutting Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port _____		10. Work started <u>10-6-91</u> finished <u>10-9-91</u>																																																											
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> NW 1/4 NW 1/4 Sec. <u>4</u> , T. <u>57</u> N. R. <u>3</u> W. <u>2</u>		11. DRILLERS CERTIFICATION <u>SC</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H2O</u> Firm No. <u>448</u> Address <u>Hayden</u> Date <u>10-10-91</u> Signed by (Firm Official) <u>John Friesen</u> and (Operator) <u>Mark Hummer</u>																																																											

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

RECEIVED
OCT 17 1991

HOSSLEY PIN 51N03W-04-3050



SCANNED
OCT 27 2009

RECEIVED
SEP 17 2001

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: : :

1. WELL TAG NO. D0017540

DRILLING PERMIT N

WELL #2

Other IDWR No

770552

2. OWNER:

Name Heather Hossley

Address 5226 E Dodd Road

City Hayden

State ID

Zip 83835

3. LOCATION OF WELL by legal description:

N
W E S
Twp 51N North ☒ or South ☐
Rge 03W East ☐ or West ☒
Sec 04 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)

5226 E. Dodd Road

City Hayden

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	24	8 sacks	pour in

Drive Shoe Used? ☒ Y ☐ N Shoe Depth(s) 24

Drive Shoe Seal Tested? ☐ Y ☒ N How?

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6	1	24	0.250	Steel	☒	☐	☒	☐
4	14	174	0.165	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations? Method Drill

☐ Screens? Screen Type

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
114	174		600	3/8"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

100 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 155 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
9	100%	170	1 hr.

Water Temp. _____ cold Bottom hole temp. _____ cold

Water Quality test or comments: (below) Depth first Water Encountered 155
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	10	Clay & gravel	☐	☒
8	10	14	Clay - brown	☐	☒
8	14	18	Clay - white	☐	☒
8	18	24	Clay - black	☐	☒
6	24	155	Basalt - black	☐	☒
6	155	160	Basalt - black - soft	☒	☐
6	160	166	Basalt - black - medium	☐	☒
6	166	174	Clay - black	☐	☒

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DEC 13 2001

Completed Depth 174 (Measurable)

Date: Started 8/17/01 Completed 8/20/01

13. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm United Drilling Inc.

Firm No 414

Name

Firm Official

and

Supervisor or Operator Jason C. Beckham

Date 8/23/01

Date 8/23/01

FORWARD WHITE COPY TO WATER RESOURCES

446

51N 3W 4

DEC 27 2009