

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 95-14877Date Received: 12-29-09Receipt No: N023169Received By: ///

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

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IDWR / NORTH

1. Name of Claimant(s) Leanne Rousseau Phone (208) 818-5166

Mailing Address 17302 W Deer Ridge Dr. Post Falls ID Zip 83854
Street or Box City State

2. Date of Priority: (Only one per claim) 06/28/2003
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 05W, Section 19
SE 1/4 of NW 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. 50N05W19440

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.

300' six inch well drilled in June 2003. Installed a 2hp, 10gpm pump in the well.

Drill tag no. D0028425

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

For Domestic purposes from 1-1 to 12-31 amount 0.04

For stock water purposes from 1-1 to 12-31 amount 0.02

7. Total Quantity claimed 0.04 cfs (✓) or AFY ()

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

Stockwater and Number of livestock) Domestic - and some horses - maximum of 10

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9. Location of Place of Use is: Township 50N, Range 05W, Section 19,
SE 1/4 of NW 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 _____

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: Home was connected to community well
prior to well drilling

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: two

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) Heanne Rousseau Date: 12-18-09

_____ 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 and for 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. _____

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IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

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

1. WELL TAG NO. **D0028425**

DRILLING PERMIT N **804269**

Other IDWR No _____

2. OWNER:

Name **Steve Malek**

Address **17302 W. Deer Ridge Road**

City **Post Falls**

State **ID**

Zip **83854**

3. LOCATION OF WELL by legal description:

N		Twp 50N	North ☒ or South ☐
W		Rge 05W	East ☐ or West ☒
E		Sec 19	1/4 SE 1/4 NW 1/4
S		10 Ac 40 Ac 160 Ac	
		Gov't Lot _____	County Kootenai
		Lat _____	Long _____

Address of Well Site: (see next line)

Deer Ridge Road

Lot _____ Blk _____

City _____ 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 Gran.	0	59	7 Sacks	Dry Pour

Drive Shoe Used? ☒ Y ☐ N Shoe Depth(s) **59'**

Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6"	+1	59	0.250	steel	☒	☐	☒	☐
4"	-25	300	0.160	PVC	☐	☒	☒	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations? Method _____
☒ Screens? Screen Type **PVC Johnson**

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
260	300	40		4"	PVC	☐	☒

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

50 ft. below ground. Artesian pressure _____ lb.
Depth flow encountered **104** 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
20	100%	300	1 Hour

Water Temp. _____ Cold _____ Bottom hole temp. _____ Cold _____
Water Quality test or comments: (below) Depth first Water Encountered **104**
Clear

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water
8	0	22	Sand with Clay	☐ Y ☒ N
8	22	31	Sand with Decomposed Granite	☐ Y ☒ N
8	31	54	Decomposed Granite - Soft	☐ Y ☒ N
8	54	59	Decomposed Granite - Medium/Soft	☐ Y ☒ N
6	59	104	Decomposed Granite - Medium/Soft	☐ Y ☒ N
6	104	112	Decomposed Granite - Soft	☒ Y ☐ N
6	112	127	Decomposed Granite - Medium/Soft	☐ Y ☒ N
6	127	139	Decomposed Granite - Soft	☒ Y ☐ N
6	139	202	Granite - Salt & Pepper - Medium/Soft	☐ Y ☒ N
6	202	216	Granite - Green - Soft	☒ Y ☐ N
6	216	254	Granite - Salt & Pepper - Medium/Soft	☐ Y ☒ N
6	254	271	Granite - Salt & Pepper - w/Green - Soft	☒ Y ☐ N
6	271	300	Granite - Grey - Medium	☐ Y ☒ N

Completed Depth **300** (Measurable)
Date: Started **6/28/03** Completed **6/28/03**

13. DRILLERS CERTIFICATION

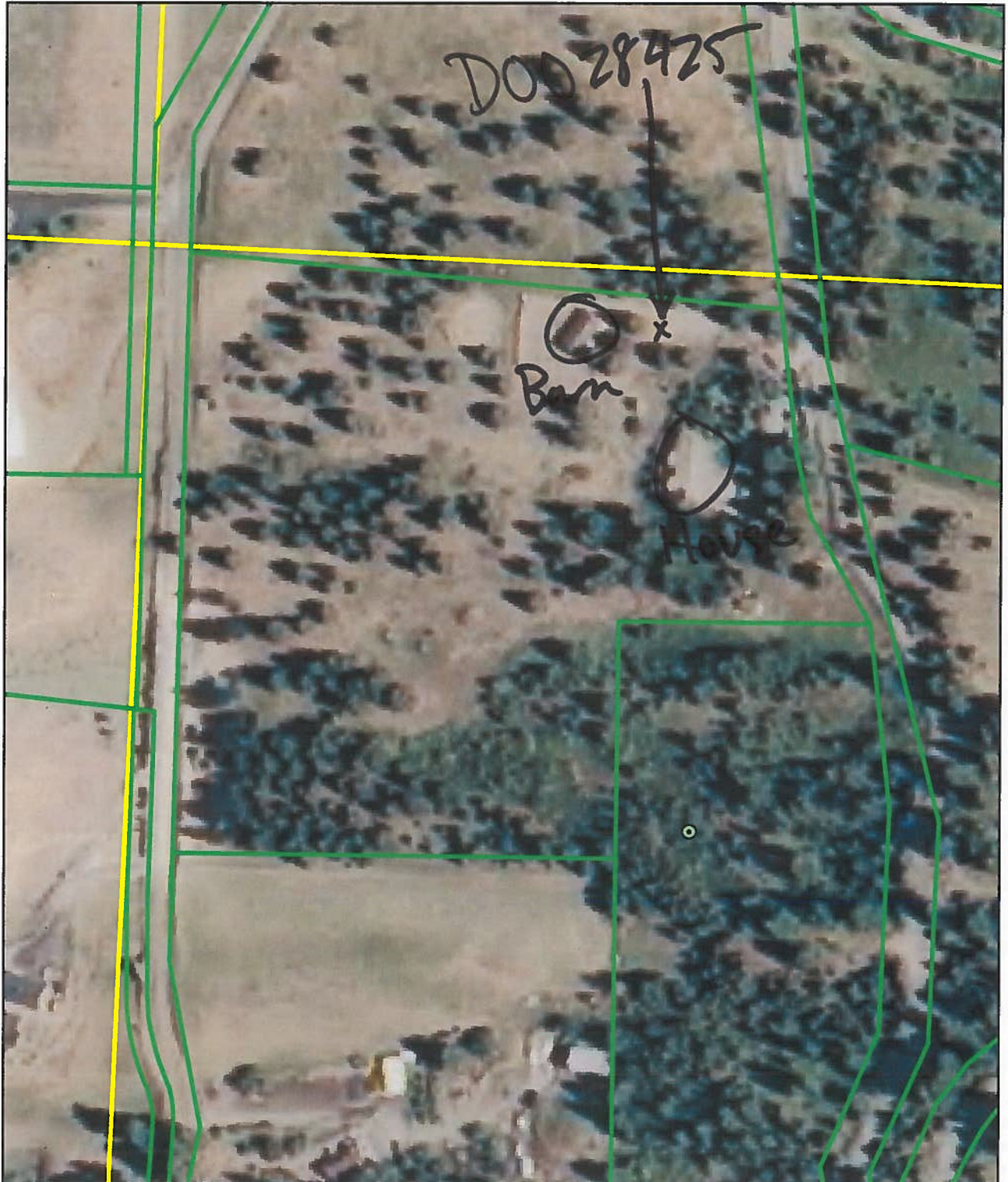
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm **United Drilling Inc.** Firm No **414**
Name _____
Firm Official **Tim M. Valls** Date **6/30/03**
and _____
Supervisor or Operator **Mark A. Penick** Date **6/30/03**

FORWARD WHITE COPY TO WATER RESOURCES

680
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DEC 24 2003

ROUSSEAU PIN 50N05W-19-4400



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