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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 95-15657Date Received: 6/1/10Receipt No: N24617Received By: db

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) Ken and/or Jennifer Lewis Phone (208) 769-4840

Mailing Address 6818 E. French Gulch Rd. Coeur d'Alene ID Zip 83814
Street or Box City State

2. Date of Priority: (Only one per claim) 09/27/1978
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 50 North, Range 3 West, Section 9
NE 1/4 of SW 1/4, or Govt. Lot _____ BM. County of Kootenai;

Parcel (PIN) no. 50N03W095340

Additional points of diversion if any: _____

If available, GPS coordinates: Latitude - 47: 41: 398 Longitude -116: 42: 730

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.

Depth 500' -- Well with piping to the home. Original well was abandoned and new well drilled.

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

For Domestic purposes from Month/Day 1-1 to Month/Day 12-31 amount 0.04 cfs (✓) or AFY ()

For _____ purposes from _____ to _____ amount _____

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, 1 Home

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9. Location of Place of Use is: Township 50 N, Range 3 W, Section 9,
NE 1/4 of SW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 50N03W095340
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:

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 D 0051775

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) Ken A. Lewis Date: 6/1/10

Jennifer L. Lewis Date: 6/1/10

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 _____

Last Name Lewis 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 _____ 1/4
 Lat: : : Long: : :

1. DRILLING PERMIT NO. _____
Other IDWR No. D 0051775

2. OWNER:

Name Ken Lewis
Address 6818 E. French Gulch Road
City Coeur d'Alene State ID Zip 83814

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location

W  E

Twp. 50 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 9 $\frac{1}{4}$ NE $\frac{1}{4}$ SW $\frac{1}{4}$
10 acres 40 acres 160 acres

S Gov't lot _____ County Kootenai
 Lat: 47: 41:398 Long: 116: 42:730

Address of Well Site same
City same

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

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 or Pounds	
Bentonite	0	20	350#	Dry granular

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 219'

Was drive shoe seal tested? ☐ Y ☒ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	219	.250	Steel	☒	☐	☒	☐
4"	20	500	S 40	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method saw cut 1/8" x 6" slot

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
480	500	1/8	36	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

Depth flow encountered _____ ft. Artesian Pressure _____ lb
Describe access port or control devices:

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
25 gpm			2 hrs

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: Cloudy, then clear after

pumping Depth first Water Encountered 343'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temp.	Y	N
10"	0	1	Topsoil		
	1	6	Clay, brownish red		
	6	12	Clay, grey		
	12	19	Clay, brownish red		
8"	19	23	Clay, grey		
	23	67	Clay, red and tan w/ sand		
	67	118	Clay, tan		
	118	206	Shale, very decomposed, brown		
	206	219	Shale, decomposed, medium		
	219	232	Shale, brown w/ blue chips		
	232	256	Shale, blue w/ brown silt		
	256	280	Shale, brown, soft but stable		
	280	315	Shale, blue, w/ brown silt		
	315	343	Shale, brown, medium 5 gpm	X	
	343	367	Shale, blue, grey, broken		
	367	386	Shale, blue, grey, firm		
	386	392	Shale, blue, grey, broken	X	
	392	435	Shale, grey, brown		
	435	446	Shale, brown, soft	X	
	446	463	Shale, grey, medium		
	463	479	Shale, grey, hard		
	479	493	Shale, grey, medium		
	493	496	Shale, broken 20+ gpm	X	
	496	500	Shale, grey, hard		
			Shale trap installed @ 340'		

Completed Depth: 500 (Measurable)
Date: Started 05/23/2007 Completed 05/25/2007

13. DRILLER'S CERTIFICATION

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

Firm Name McCarty Drilling & Pump Inc Firm No. 586

Firm Official D Scott McCut Date 6-1-07

Supervisor or Operator _____ Date _____
(Sign once if Firm Official & Operator)

Date: 6/1/2007 Time:8:56:04 AM

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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER 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>DANNY D. BASSETT</u> Address <u>3407 4th St Curd d'Alene Idaho</u> Owner's Permit No. <u>95-78-N-59 83814.</u>		7. WATER LEVEL Static water level <u>260</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 <u>60</u> °F. Quality <u>Good</u>																																																																																																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____		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>20</u></td><td></td><td></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>20</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">Hole 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>6</td><td>0</td><td>1</td><td>Top Soil</td><td></td><td></td></tr><tr><td></td><td>1</td><td>3</td><td>Decomp. ~~concrete~~</td><td></td><td></td></tr><tr><td></td><td>3</td><td>30</td><td>clay yellow</td><td></td><td></td></tr><tr><td></td><td>30</td><td>35</td><td>Decomposed shale</td><td></td><td></td></tr><tr><td></td><td>35</td><td>60</td><td>clay - orange Hard</td><td></td><td></td></tr><tr><td></td><td>60</td><td>62</td><td>Decomposed shale</td><td></td><td></td></tr><tr><td></td><td>62</td><td>100</td><td>clay orange</td><td></td><td></td></tr><tr><td></td><td>100</td><td>203</td><td>Decomposed shale</td><td></td><td></td></tr><tr><td></td><td>203</td><td>220</td><td>Shale GRAY Hard</td><td></td><td></td></tr><tr><td></td><td>220</td><td>227</td><td>Shale GREEN "</td><td></td><td></td></tr><tr><td></td><td>227</td><td>235</td><td>Shale GRAY "</td><td></td><td></td></tr><tr><td></td><td>235</td><td>240</td><td>Shale GREEN "</td><td></td><td></td></tr><tr><td></td><td>240</td><td>250</td><td>Shale GRAY "</td><td></td><td></td></tr><tr><td></td><td>250</td><td>252</td><td>Shale GREEN "</td><td></td><td></td></tr><tr><td></td><td>252</td><td>280</td><td>Shale GRAY "</td><td></td><td></td></tr><tr><td></td><td>280</td><td>350</td><td>Shale GRAY "</td><td></td><td></td></tr><tr><td></td><td>350</td><td>365</td><td>Shale GREEN with Quartz STAMPS.</td><td></td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	6	0	1	Top Soil				1	3	Decomp. ~~concrete~~				3	30	clay yellow				30	35	Decomposed shale				35	60	clay - orange Hard				60	62	Decomposed shale				62	100	clay orange				100	203	Decomposed shale				203	220	Shale GRAY Hard				220	227	Shale GREEN "				227	235	Shale GRAY "				235	240	Shale GREEN "				240	250	Shale GRAY "				250	252	Shale GREEN "				252	280	Shale GRAY "				280	350	Shale GRAY "				350	365	Shale GREEN with Quartz STAMPS.		
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5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ inches Diameter _____ inches From _____ feet To _____ feet <u>p.v.c.</u> _____ inches _____ inches <u>185</u> feet <u>365</u> feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? ☐ Yes ☒ No Was a packer or seal used? ☒ Yes ☐ No <u>p.v.c.</u> Perforated? ☒ Yes ☐ No <u>p.v.c.</u> How perforated? ☐ Factory ☐ Knife ☐ Torch <u>SAW</u> Size of perforation <u>1/4</u> inches by <u>6</u> inches Number _____ From _____ To _____ <u>240</u> perforations <u>285</u> feet <u>365</u> 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>18</u> Material used in seal: ☐ Cement grout ☒ Puddling clay ☐ Well cuttings 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 <u>Welded plate</u>		RECEIVED NOV 30 1978 Department of Water Resources Curtis Office <u>520</u>																																																																																																																	
6. LOCATION OF WELL Sketch map location must agree with written location. <u>as</u> <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td></td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr></table> County <u>KOOTENAI</u> <u>SE 1/4 SE 1/4 Sec. 9, T. 50 N. R. 3 E.W.</u> Subdivision Name _____ Lot No. _____ Block No. _____		N					W				E																10. Work started <u>9/26/78</u> finished <u>9/27/78</u>																																																																																								
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11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were compiled with at the time the rig was removed. Firm Name <u>American Drilling</u> Firm No. <u>269</u> Address <u>PO Box 14977 Spokane</u> Date <u>10/20/78</u> Signed by (Firm Official) <u>Louis Murphy</u> and (Operator) <u>William Wright</u>		SCANNED JUN - 1 2010																																																																																																																	