

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 95-16157Date Received: 6-7-10Receipt No: N024794Received By: W

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

RECEIVED

JUN -7 2010

IDWR/North

1. Name of Claimant(s) DAVID L. Patjere And/or Jene E Hovenga Phone (208) 765-8285Mailing Address 2458 E. Nettleton Gulch Rd. Coeur d'Alene ID Zip 83815
Street or Box City State2. Date of Priority: (Only one per claim) 10/01/1995
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 3W, Section 6,
NW 1/4 of SE 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. 50N 03W - 06 - 8600

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.

permit # 95-95-N-131. Well completed Aug 1995 and
connected to one home, later connected to 3000g. storage reservoir

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 () or AFY ()

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

Stockwater and Number of livestock) 1- HomeSCANNED
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25

9. Location of Place of Use is: Township 50N, Range 3W, Section 6,
NW 1/4 of SE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

for (Check One) Domestic (☒) Stock () Domestic and Stock ()

If different than shown in Item 4

Additional places of use, if any OTF T50N R03W S6 SWSE (same parcel)

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: City CDA System Adjacent but not connected.

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: 2

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) D. H. Patzer Date: 11/9/09

_____ 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 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 Patzer Identification No. _____

RECORDED
JUN - 7 2010

Form 238-7
1/94

HAWAII DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

**Use Typewriter
or
Ball Point Pen**

1. DRILLING PERMIT NO. 95-95-N-131-000
Other IDWR No. _____

2. OWNER:

Name Hallmark Homes
Address 7560 Gov't Way
City CDA State Id. Zip 83814

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.


 Twp. 50 North ☒ or South ☐
 Rge. 3 East ☐ or West ☒
 Sec. 6 1/4 NW 1/4 SE 1/4
 Gov't Lot _____ County Kootenai

Address of Well Site 2450 NEHilton
Quitch - 1/2 mi. From 15th St. City ChA.
(Give at least name of road + distance to road or landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Casing Seal	0	25	11	

Was drive shoe used? Y ☒ N ☐

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1	47	250	SL	☒	☐	☒	☐
4	-20	200	160	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method Sawcut
☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
120	160	1/8" x 4	40		PVC	☐	☒
180	200	1/8" x 4	20		PVC	☐	☒
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

80 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: Rotted 6" well cap

NW SE 6 60N 3W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
15			

Water Temp. Cold Bottom hole temp. _____

Water Quality test or comments: Good

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

[illegible]

Completed Depth 200' (Measurable)

Date: Started 8-2-95 Completed 8-3-95

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 **AQUA DRILLING
& EXPLORATION INC.** Firm No. **163**

Firm Official Scott M. Braum Peer Date 8-5-95

and
Supervisor or Operator Wesley Miller, Date 8-5-95

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

JUN - 7 2010

PATZER PIN 50N03W-06-8600



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