

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 95-15314
Date Received: 9/27/10
Receipt No: ND25779
Received By: Ken

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) MEL & SANDRA WACH Phone (727) 515-8253
Mailing Address 5635 W. Spyglass Ln CDA Id ZIP 83814
Street or Box City State
2. Date of Priority (Only one (1) per claim) 8-26-1993
Month Day Year (YYYY)

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

4. a. Location of Point of Diversion is: Township 48 N, Range 4 W, Section 9
_____, 1/4 of _____, 1/4 Govt. Lot 9, BM., County of Kootenai

Parcel (PIN) no. -7300

Additional points of diversion if any: -

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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 & Pump

SCANNED
SEP 27 2010

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Domestic purposes from 1-1 to 12/31 amount .04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .04 (cfs) and/or (b) _____ (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) _____

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
42N	4W	9													X				

Parcel (PIN) no(s). _____

Total number of acres irrigated _____

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 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: _____

Last Name _____ Identification No. _____

SCANNED
SEP 27 2010

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice (☐) License (☐) Permit (☐) Decree (☐)

Court _____ Decree Date _____ Plaintiff v. Defendant _____

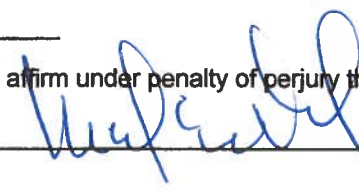
If applicable provide IDWR Water Right Number _____

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: 9/27/10

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

Title of _____ Organization

that I have signed the foregoing document in the space below as

Title of _____ 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 _____ Identification No. _____

RECEIVED
SEP 27 2010

Form 238-7
8/83

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

 Use Typewriter
or
Ball Point Pen

FEB 14 1994

1. DRILLING PERMIT NO. 93 - 93 - 11 - 169 - 000

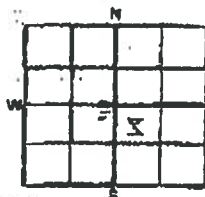
Other IDWR No. _____

2. OWNER:

Name Jacques VauxAddress P.O. Box 7724, Santa Rosa, CA 95405

City _____ State _____ Zip _____

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.
 T. 48 North ☒ or South ☐
 E. 4 East ☐ or West ☒
 Sec. 9 1/4 NE 1/4 SW 1/4
 Gov't Lot _____ County Teton

Address of Well Site _____

(Give at least Direction + Distance to Road or Landmark)

Lot No. A Block No. _____ Subd. 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	
Bentonite	0	10		

Was drive shoe seal tested? ☐ YES ☒ NO How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Casing	Inner	Steel	Plastic	Welded	Threaded
6	12	157	250	X		☒	☐	☐	☐
4	17	399	160	psi	X	☐	☒	☐	☐

Final location of shoes 157'

Top Packer or Headpipe _____ Bottom Tealpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method skill saw in pvc liner
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Teal Pipe Size	Casing	Liner
352	399	1/4"	90	4"		☐	☒
						☐	☐
						☐	☐

NWSE 9 48N 4W

10. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Pumping Depth	Time
20 + gpm	350		2 hrs

Temperature of water _____ Was a water analysis done? Yes ☐ No ☒

By whom? _____

Water Quality (odor, etc.) _____

Bottom Hole Temperature _____

11. STATIC WATER LEVEL:

280 ft. below surface Depth artesian flow found _____

Artesian pressure _____ lb. Describe access port _____

Describe Controlling Devices: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Box	From	To	Remarks: Lithology, Water Quality & Temperature	GPM	SWL
10	0	6	sandy loam soil		
	6	27	tan clay with sand		
	27	38	coarse sand		
	38	76	fractured brown basalt		
	76	125	tan clay with sand		
	125	149	tan clay with brown seams		
	149	157	clay, brown tan, hard		
	157	167	clay, tan, hard		
	167	185	basalt, brown, fractured		
	185	194	basalt, dark grey, hard		
	194	200	basalt, fractured, clay, with soft spots, tan		
	200	228	basalt, fractured, grey brown		
	228	355	basalt, dark grey, hard		
	355	357	basalt, fractured, grey brown		
	357	395	basalt, dark grey, hard		
	399	402	sand with water approx 20 gpm		

RECEIVED

FEB 07 1995

SEP 07 1993

NORTHWEST REGION
17147Date Started 2/23/93Completed 5/26/93

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 320 Well Service, Inc. Firm No. 443Firm Official John J. J. J. Date 9-2-93and Supervisor or Operator [Signature] Date 9-2-93

(Sign once in Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

SEP 27 2010