

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 95-15261
Date Received: 6/1/11
Receipt No: N027390A
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) Clyde a Long Phone (208) 686-1370

Mailing Address 1995 Long Rd PLummer Idaho
Street or Box City State Zip 83851

2. Date of Priority: (Only one per claim) 10-26-71
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 46 N, Range 5 W, Section 12,
NW 1/4 of SW 1/4, or Govt. Lot _____ BM. County of BENEFICIAL
Parcel (PIN) no. _____

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.

Well + Pump

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

For domestic purposes from 11 Month/Day to 12-31 Month/Day amount 0.4 cfs () or AFY ()

For STOCK purposes from 11 Month/Day to 12-31 Month/Day amount 0.02 cfs () or AFY ()

7. Total Quantity claimed 0.6 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 10-20

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MAY 31 2011

9. Location of Place of Use is: Township 46, Range 5W, Section 12,
NW 1/4 of SW 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 _____

10. In which county (ies) are lands listed above as place of use located? BENEFICIAL

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 _____

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) C. Lytle a Long Date: 6-1-11

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:

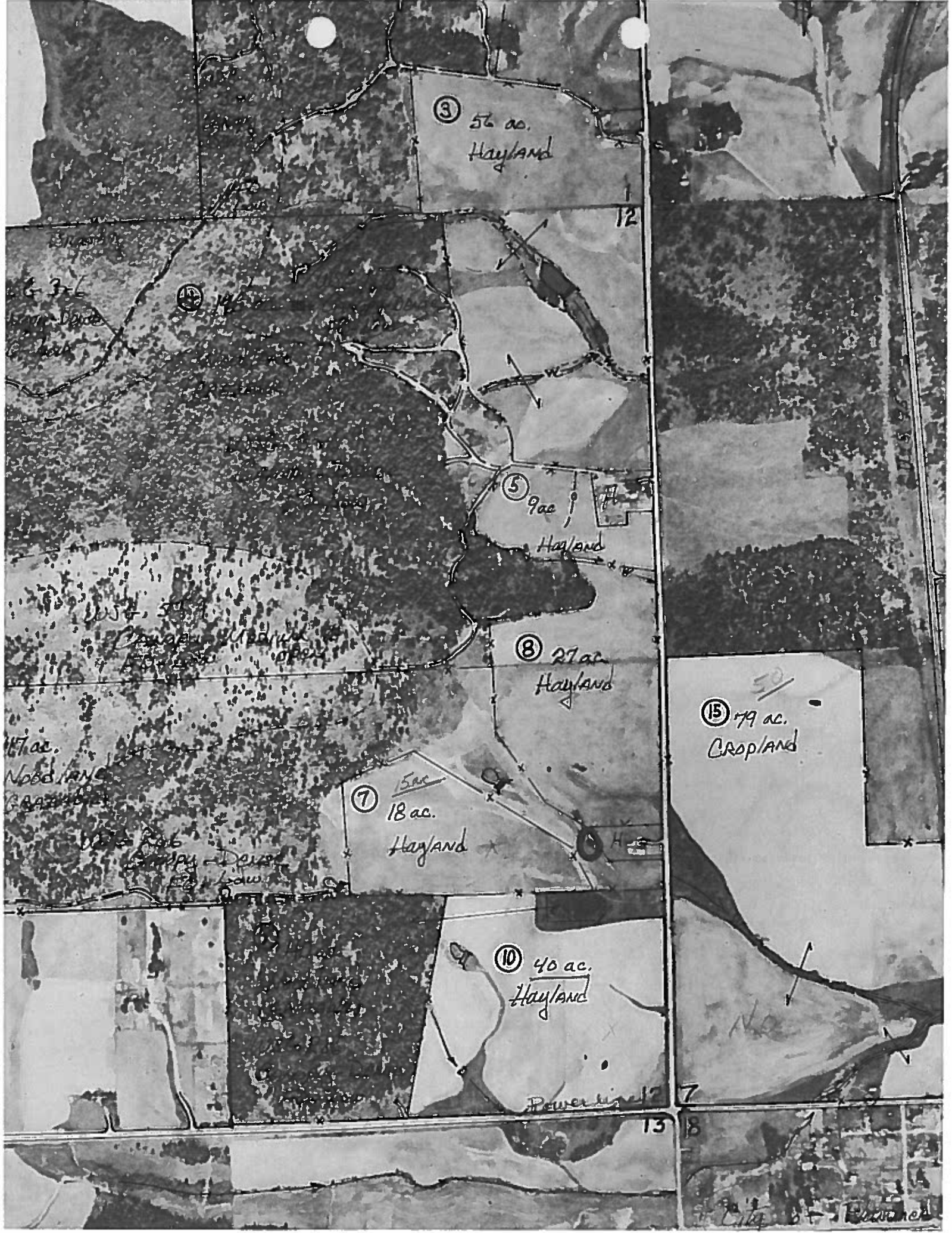
Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Last Name _____ Identification No. _____

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③ 56 ac.
Hayland

⑫ 14 ac.

⑤ 9 ac.

Hayland

⑧ 27 ac.

Hayland

⑦ 15 ac.
18 ac.

Hayland

⑩ 40 ac.

Hayland

⑮ 50
79 ac.

Crop/land

Power line

City of ...

WELL DRILLER'S REPORT

State law requires that this report be filed with the State Reclamation Engineer within 30 days after completion or abandonment of the well.

RECEIVED

Department of Administration

1. WELL OWNER
Name Clyde Long
Address Plummer Idaho
Owner's Permit No. 95-71-N-2

2. NATURE OF WORK
☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning)

3. PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Test
☐ Municipal ☐ Industrial ☐ Stock

4. METHOD DRILLED
☒ Cable ☐ Rotary ☐ Dug ☐ Other

5. WELL CONSTRUCTION
Diameter of hole 6 inches Total depth 94 feet
Casing schedule: ☒ Steel ☐ Concrete
Thickness _____ Diameter _____ From _____ To _____
1/4 inches 6 inches 18 feet 26 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet

Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch
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? ☒ Yes ☐ No To what depth 25 feet
Material used in seal ☒ Cement grout ☐ Puddling clay

6. LOCATION OF WELL
Sketch map location must agree with written location.

County Beneish
N 1/4 x SE 1/4 Sec. 12 T. 46 N. R. 5 E/W

7. WATER LEVEL
Static water level 40 feet below land surface
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Temperature 52 °F. Quality GOOD
Pressure closed-in pressure _____ p.s.i.
Controlled by ☐ Valve ☐ Cap ☐ Plug

8. WELL TEST DATA
☐ Pump ☒ Bailer ☐ Other
Discharge G.P.M. Draw Down Hours Pumped
25 34 ft 30 min

9. LITHOLOGIC LOG			Hole Diam.	Depth	Material	Water	
				From	To	Yes	No
			8	0	14	Loose top soil	X
			8	1	20	Brown clay	X
			8	20	25	Light colored Gravel	X
			6	25	30	Gravel Gravel	X
			6	30	55	Basalt Rock HARD	X
			6	55	80	Basalt Rock SOFTER	X
			6	70	72	Basalt Rock 3' 11" HR	X
			6	72	85	Basalt Rock 3' 11" HR	X
			6	85	87	Basalt Rock 4' 11" HR	X
			6	87	94	Basalt Rock 10' 11" HR	X

10. Work started OCT 12 finished OCT 26-71

11. DRILLER'S CERTIFICATION
This well was drilled under my supervision and this report is true to the best of my knowledge.
Driller's or Firm's Name Fredrick Well Drilling Number 71
Address St. Louis Mo
Signed By Fredrick Date OCT 26-71

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MAY 31 2011