

RECEIVED

MAR 26 2018

DEPARTMENT OF
WATER RESOURCES

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: 95-13533
Date Received:
Receipt No: N022062
Amount Paid: \$25.00
Received By: _____

AMENDED

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)

BYRON N BUBLITZ
PO BOX 827
RATHDRUM ID 83858

Phone: (208) 687-0903

SHANNA V BUBLITZ
PO BOX 827
RATHDRUM ID 83858

Phone: (208) 687-0903

2. Date of Priority: 10/9/1985

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
51N	05W	4	NE NW	3	KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.09		

7. Total Quantity Appropriated is:

0.09 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

1 home

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
51N	05W	4	NE		NW	3	

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:

13. Basis of Claim: Beneficial Use

14. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice 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: 1

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):

Bryan S. Little

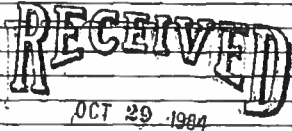
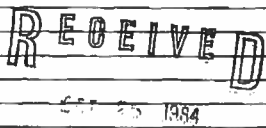
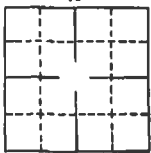
Date: 3-22-18

Shanna V. Bublitz

Date: 3/22/2018

State 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>LARRY R. WRIGHT</u> Address <u>5455 Penna. Dr. Rd</u> Owner's Permit No. <u>Per Falls to 83854</u> <u>95-84-N-17</u>	7. WATER LEVEL Static water level <u>135</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>cold</u> °F. Quality <u>Excellent</u> <i>Describe artesian or temperature zones below.</i>																																								
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>40</u></td> <td><u>Variable</u></td> <td><u>1/2 hr.</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>40</u>	<u>Variable</u>	<u>1/2 hr.</u>																																		
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore 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><u>8</u></td> <td><u>0</u></td> <td><u>52</u></td> <td><u>Decomposed Granite</u></td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td><u>52</u></td> <td><u>58</u></td> <td><u>Granite</u></td> <td> </td> <td><u>X</u></td> </tr> <tr> <td><u>6</u></td> <td><u>58</u></td> <td><u>375</u></td> <td><u>Granite</u></td> <td> </td> <td><u>X</u></td> </tr> <tr> <td> </td> <td><u>375</u></td> <td><u>401</u></td> <td><u>Green Soft Granite</u></td> <td><u>X</u></td> <td> </td> </tr> <tr> <td> </td> <td><u>401</u></td> <td><u>410</u></td> <td><u>Granite</u></td> <td> </td> <td><u>X</u></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>8</u>	<u>0</u>	<u>52</u>	<u>Decomposed Granite</u>				<u>52</u>	<u>58</u>	<u>Granite</u>		<u>X</u>	<u>6</u>	<u>58</u>	<u>375</u>	<u>Granite</u>		<u>X</u>		<u>375</u>	<u>401</u>	<u>Green Soft Granite</u>	<u>X</u>			<u>401</u>	<u>410</u>	<u>Granite</u>		<u>X</u>
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	 OCT 29 1984 Department of Water Resources  OCT 25 1984 Department of Water Resources																																								
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>1.250</u> inches</td> <td><u>6</u> inches</td> <td><u>2</u> feet</td> <td><u>58</u> feet</td> </tr> <tr> <td><u>160 PVC</u> inches</td> <td><u>4</u> inches</td> <td><u>50</u> feet</td> <td><u>410</u> feet</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☒ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation <u>1/4</u> inches by <u>1/4</u> inches <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>50</u> perforations</td> <td><u>370</u> feet</td> <td><u>390</u> feet</td> </tr> <tr> <td><u>50</u> perforations</td> <td><u>330</u> feet</td> <td><u>350</u> feet</td> </tr> <tr> <td><u>50</u> perforations</td> <td><u>250</u> feet</td> <td><u>270</u> feet</td> </tr> </tbody> </table> 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>58</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ <u>Cuttings</u> 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 _____	Thickness	Diameter	From	To	<u>1.250</u> inches	<u>6</u> inches	<u>2</u> feet	<u>58</u> feet	<u>160 PVC</u> inches	<u>4</u> inches	<u>50</u> feet	<u>410</u> feet													Number	From	To	<u>50</u> perforations	<u>370</u> feet	<u>390</u> feet	<u>50</u> perforations	<u>330</u> feet	<u>350</u> feet	<u>50</u> perforations	<u>250</u> feet	<u>270</u> feet	10. Work started <u>7/6/84</u> finished <u>7/9/84</u>				
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6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location.  Subdivision Name <u>SE 1/4 of Gov't Lot 7</u> Lot No. _____ Block No. _____ County <u>KOOTENAI</u> <u>1/4</u> Sec. <u>4</u> T. <u>51</u> N. S. R. <u>5</u> EW	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. <u>Associated Well</u> Firm Name <u>Drillers Inc</u> Firm No. <u>245</u> Address <u>Box 723 C.D.A.</u> Date <u>7/10/84</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>Robert F. Pegg</u>																																								

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT