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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 PALOUSE RIVER BASIN WATER
SYSTEM

CIVIL CASE NUMBER: 59576

Ident. Number: 87-10044

Date Received: 5/7/2019

Receipt No:

Claim Fee:

Received By:

N034291
\$141.00
Ja

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

CAROL THOMPSON
1387 DEEP CREEK RD
POTLATCH ID 83855-9777

Phone: (208) 875-1095

2. Date of Priority: 11/16/2005

3. Source:

Trib. to:

GROUND WATER
GROUND WATER
GROUND WATER
GROUND WATER
GROUND WATER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
42N	05W	~~11~~ 2	~~NW NE SE~~ SW		LATAH	
42N	05W	2	SE SW		LATAH	
42N	05W	2	SE ~~SW~~ SE		LATAH	
42N	05W	11	NE NE		LATAH	
42N	05W	11	NW NE		LATAH	

5. Description of diverting works:

TWO WELLS PUMPS AND PIPELINES AND BIG GUN SPRINKLERS
TWO WELLS PUMPS AND PIPELINES AND BIG GUN SPRINKLERS
PIPELINE AND 2 BIG GUN SPRINKLERS
PIPELINE AND 2 BIG GUN SPRINKLERS
PIPELINE AND 2 BIG GUN SPRINKLERS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
IRRIGATION	04/01	10/31	0.5		212.2

7. Total Quantity Appropriated is:

0.5 C.F.S. and/or 212.2 A.F.A.

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
42N	05W	2	SE	SW			12
42N	05W	2	SW	SE			~~23~~ 22
42N	05W	2	SE	SE			~~11~~ 12
42N	05W	11	NE	NE			~~3.4~~ 5.0
42N	05W	11	NW	NE			40

Total Acres = ~~89.4~~ 91

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:

None

12. Remarks:

Priority Date Explanation:

After specific notification by the Department, the right holder shall install a suitable measuring device or shall enter into an agreement with the Department to determine the amount of water diverted from power records and shall annually report the information to the Department.

This right when combined with all other rights shall provide no more than 0.02 cfs per acre nor more than 3.0 afa per acre at the field headgate for irrigation of the lands above.

13. Basis of Claim: License

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 PALOUSE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 4

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): Carol Thompson Date: 5/7/19

Date: _____

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No.			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D 0039898
 DRILLING PERMIT NO. 827475
 Water Right or Injection Well No. _____

2. OWNER:
 Name Coral Thompson
 Address 1402 Depp Cr Rd
 City Coltateh State Id Zip 83855

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 42 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 2 1/4 SE 1/4 SE 1/4
 Gov't Lot _____ County Latah
 Lat: _____ Long: _____
 Address of Well Site 5 miles E of
Depp Cr Rd City Moscow
 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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>60</u>	<u>8 bags</u>	<u>Dry</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 120
 Was drive shoe seal tested? ☒ Y ☐ N How? air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>12</u>	<u>178</u>	<u>250</u>	<u>steel</u>	☒	☐	☒	☐
<u>4 1/2"</u>	<u>20</u>	<u>400</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE
 Perforation Method Law Cut
 Screen Type & Method of Installation

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>450</u>	<u>500</u>	<u>3/4 X 3</u>	<u>150</u>	<u>4.5</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
100 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____
Top of Well
42N 5W 2

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>50 gpm</u>			

Water Temp. 54° Bottom hole temp. 54°
 Water Quality test or comments: Good

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>2</u>	<u>dirt</u>		
	<u>2</u>	<u>24</u>	<u>clay</u>		☒
	<u>24</u>	<u>100</u>	<u>soft brown clay</u>		☒
	<u>100</u>	<u>120</u>	<u>soft basalt</u>		☒
	<u>120</u>	<u>190</u>	<u>med black basalt</u>		☒
	<u>190</u>	<u>285</u>	<u>Hard grey basalt</u>		☒
	<u>285</u>	<u>303</u>	<u>soft black basalt</u>		☒
	<u>303</u>	<u>445</u>	<u>Hard grey basalt</u>		☒
	<u>445</u>	<u>500</u>	<u>soft black basalt</u>		☒

50 gpm

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 APR 19 2005
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RECEIVED
 APR 19 2005
 IDWR/North

Completed Depth 500 (Measurable)
 Date: Started 2/7/05 Completed 2/9/05

14. DRILLER'S CERTIFICATION
 I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
 Company Name Uhlenkott Drill Firm No. 125
 Principal Driller Jim Uhlenkott Date 3/8/05
 and _____ Date _____
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____

Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D 0033621
 DRILLING PERMIT NO. 814383
 Water Right or Injection Well No. _____

2. OWNER:
 Name Carol Thompson
 Address 1402 Deep Creek Rd
 City Potlatch State ID Zip 83853

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 42 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 11 1/4 SW 1/4 NE 1/4
 Gov't Lot _____ County Latah 160 acres
 Lat: _____ Long: _____
 Address of Well Site 4 miles N of City Potlatch
 (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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>22</u>	<u>4 bags</u>	<u>Dry</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 28 ft
 Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6" + 2</u>	<u>30</u>	<u>250</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4 1/2" - 2.5</u>	<u>125</u>	<u>160</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE
 Perforation Method Law cut
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>90</u>	<u>125</u>	<u>1/8 x 3</u>	<u>100</u>	<u>4 1/2"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
3.2 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____
Top of well
42N 5W 11

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>12 gpm</u>			<u>1.5</u>

Water Temp. 54° Bottom hole temp. 54°
 Water Quality test or comments: Good
 Depth first Water Encounter 100 ft

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>9</u>	<u>0</u>	<u>2</u>	<u>dist</u>		
<u>2</u>	<u>28</u>	<u>32</u>	<u>clay</u>		
<u>28</u>	<u>32</u>	<u>46</u>	<u>rock</u>		
<u>6</u>	<u>32</u>	<u>46</u>	<u>basalt med</u>		
<u>46</u>	<u>58</u>	<u>78</u>	<u>clay</u>		
<u>58</u>	<u>78</u>	<u>125</u>	<u>soft grey type Rock</u>		
<u>78</u>	<u>125</u>		<u>basalt hard</u>		

RECEIVED
 JUL 13 2004
 IDWR/North
 RECEIVED
 JUL 27 2004
 IDWR/North
 RECEIVED
 JUN 16 2004
 IDWR/North

Completed Depth 125 ft (Measurable)
 Date: Started May 5, 04 Completed May 5, 04

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

Company Name Whitcomb Drill Firm No. 125
 Principal Driller Tom Whitcomb Date June 13, 04
 and Tom Whitcomb Date June 13, 04
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____
 Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0033616

DRILLING PERMIT NO. 813788

Water Right or Injection Well No. _____

2. OWNER:

Name Carol Thompson

Address 1402 Deep Creek Rd

City Pattlach State ID Zip 83855

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 42 North ☒ or South ☐
Rge. 5 East ☐ or West ☒
Sec. 11 1/4 SW 1/4 NE 1/4
Gov't Lot _____ 10 acres _____ 40 acres _____ 160 acres _____

Lat: _____ Long: _____

Address of Well Site 4 miles N of
Pattlach City Pattlach

(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

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____ (Replacement etc.)

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>24</u>	<u>7 bags</u>	<u>Dry</u>

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

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>8" +2</u>	<u>24</u>	<u>250</u>	<u>250</u>	<u>steel</u>	☒	☐	☒	☐
<u>6" -15</u>	<u>275</u>	<u>100</u>	<u>100</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Law Cut

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>500</u>	<u>575</u>	<u>1/4 X 3/16</u>	<u>100</u>	<u>6"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

12 ft. below ground Artesian pressure _____ lb.

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

42N 5W 11

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____	1/4 _____	1/4 _____	
Lat: _____	Long: _____		

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>80 to 85 gpm</u>			<u>1.5</u>

Water Temp. 54.0

Bottom hole temp. 54.0

Water Quality test or comments: Good

Depth first Water Encounter 275

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
12	0	2	dirt	Y N
2	22	22	Clay	
8	22	63	med basalt	
63	74	74	soft shale type Rock	
74	105	105	med basalt	
105	127	127	med brown basalt	
127	275	275	med basalt	
275	310	310	blue shale in basalt	
310	525	525	hard basalt	
525	575	575	soft brown shale	

RECEIVED
JUL 13 2004
IDWR/North

Completed Depth 575 (Measurable)

Date: Started April 28, 04 Completed May 4, 04

14. DRILLER'S CERTIFICATION

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

Company Name Whelan Drilling Firm No. 125

Principal Driller Tom Whelan Date June 12, 04

and Driller or Operator II Tom Whelan Date June 12, 04

Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 87-94-N-66-000
Other IDWR No. _____

2. OWNER:

Name Carol Thompson
Address Rt 1 Box 125
City Petalatch State Id Zip 83855

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 42 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 2 1/4 SW 1/4 SW 1/4
 Gov't Lot _____ County _____

Address of Well Site 1/2 mile N. of
Damp ck. Rd. City Pottlatch
 (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	
Bentonite	0	20	800	Top Pour

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
8 in.	+ 2	- 4 1/2	250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method Torch
☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Linear
-357	-417	4x4	160	8		☒	☐
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

20 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: Top of casing

control devices: Top of casing
SWSW 2 42W 5W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
200			.75

Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: Good

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

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 Uhlenkott Drilling Firm No. 125

Firm Official Kay W. Marshall Date 11-19-94

Supervisor or Operator Don J. Winkhart Date 11-17-94

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

