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MAY 14 2019
DEPT. 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

Claim ID: 87-10433

Date Received: 5-14-2019

Receipt No: N034391

Claim Fee: \$25.00 By: JB

(75.00 Total)

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

Please type or print clearly

- 425 327-8654 (R)
1. Name of claimant(s) Rob + Amy Larson Phone (208) 874-3754 (H)
Mailing address 1260 Saddle Ridge Rd. Viola, ID Zip 83872
Street or Box City State
Email address (optional) rob.amy.larson@gmail.com
2. Date of priority: (Only one per claim) 3/31/94 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____
4. Location of point of diversion is: Township 40, Range 5, Section 5
NE 1/4 of SW 1/4, or Govt. Lot _____ BM, County of Latah
Parcel no. RP40N05W05S25A
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 ID: 279421 8" casing 60 feet deep
6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from 1/1 to 12/31 amount 2.01 cfs () or AFY ()
For Stock purposes from _____ to _____ amount _____
7. Total quantity claimed 2.01 cfs () or AFY ()
8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
1 home

9. Location of place of use is: Township 40, Range 5, Section 5,
NE 1/4 of SW 1/4, Govt. Lot _____ BM, Parcel no. RP40N05W05S255A
if different than shown in Item 4
for (check one) Domestic () Stock () Domestic and Stock (X)

Additional places of use, if any _____

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

11. Do you own the property listed above as place of use? Yes (X) 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 (X)

13. Remarks (include an explanation of the priority date selected):
Well completed + water put to use

14. Basis of claim (check one) Beneficial Use (X) 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 Water System 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: 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) Rob and or Amy Jim Date: 5/14/19

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Agent's title (Please print) _____ of _____
Name of organization (Please print)
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. Notice of Appearance:

Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on 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 _____

Name of claimant(s) _____ Claim ID _____



idwr.maps.arcgis.com

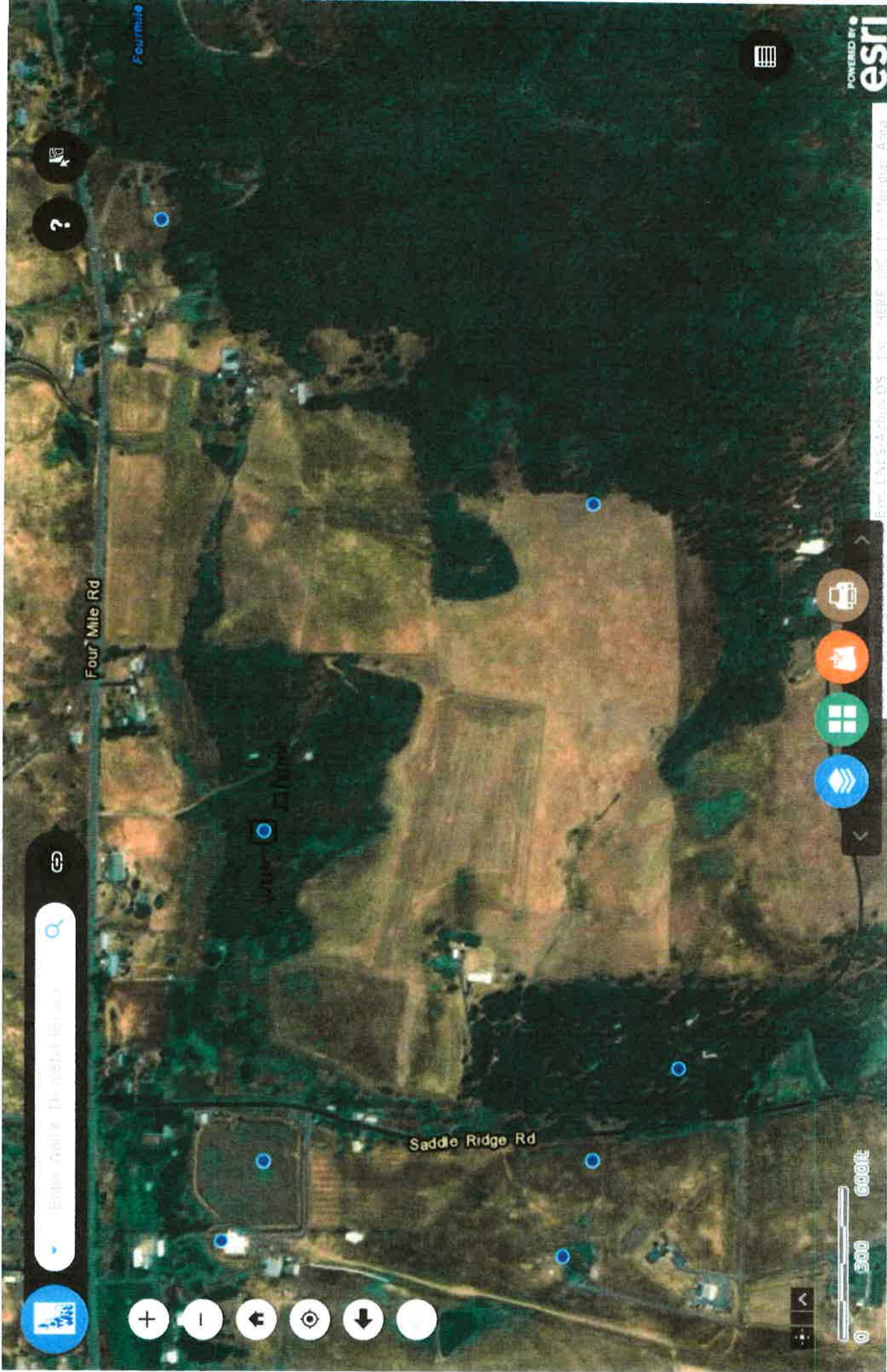


Geographical Information System (GIS)

Latah County

ArcGIS Viewer for Flex

Wells and Groundwater Managem...



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JUN - 6 1994

2. OWNER:

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

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	
benlonite	0	99	25 lbs	slurry

Was drive shoe used? Y ☒ N ☐

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	+1	29	AL4	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

❏ Perforations

Method

❏ Screens

Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Lines
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

160 ft. below ground Artesian pressure lb.

Depth flow encountered 50 ft. Describe access port or control devices:

NESW S 70N SW

11. WELL TESTS:

☐ Pump ☐ Bailer

Yield gal./min.	Drawdown	Pumping Level	Time
54		303	30 min

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

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 WITT Well Drilling Firm No. _____

Firm Official Carol L. Witt Date 5/20/94

and

Supervisor or Operator Vogel Date 5/20/94
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES