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JUN 13 2019

DEPARTMENT OF
WATER RESOURCES

Form No. 42-1408-2 (Internet 7/17)

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Claim ID: _____

Date Received: _____

Receipt No: _____

Claim Fee: _____ By: _____

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

- Name of claimant(s) Kevin & Linda Renfrow Phone (208) 289-4651
Mailing address 1415 American Ridge Rd. Kendrick Id. Zip 83537
Street or Box City State
Email address (optional) LKRenfrow@hotmail.com
- Date of priority: (Only one per claim) December 5, 1996 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 38 N, Range 3 W, Section 16
NE 1/4 of SW 1/4, or Govt. Lot _____ BM, County of Latah
Parcel no. RP38N03W164904A
Additional points of diversion, if any: _____
If available, GPS coordinates: _____
- 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.
Drilled well 297' deep on December 5, 1996.
- 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 0.04 cfs () or AFY ()
Month/Day Month/Day
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.04 cfs () or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic - 1 Home

9. Location of place of use is: Township 38 N, Range 3 W, Section 16,
NE 1/4 of SW 1/4, Govt. Lot _____ BM, Parcel no. RP38N03W164904A
If different than shown in Item 4
for (check one) Domestic ☒ Stock () Domestic and Stock ()

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 ☒ 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 (include an explanation of the priority date selected):

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 Notice in the Snake 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: 0

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) Karen Renfro Date: 6/10/19
Linda Renfro Date: 6/10/19

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

_____ of _____
Agent's title (Please print) 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 _____

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only			
Inspected by _____			
Twp _____ Rge _____ Sec _____		_____ 1/4 _____ 1/4 _____ 1/4	
Lat: _____ Long: _____		_____	

1. DRILLING PERMIT NO. 86-96-N-52

Other IDWR No. _____

2. OWNER:

Name Kevin RenfrowAddress 1029 Havens RdCity Kendrick State Id Zip 83837

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N		Twp. <u>38</u> North ☒ or South ☐	
E		Rge. <u>3</u> East ☐ or West ☒	
S		Sec. <u>16</u> 1/4 <u>NE</u> 1/4 <u>SW</u> 1/4	
W		Gov't Lot _____ County <u>Latah</u>	
		Lat: _____ Long: _____	
		Address of Well Site <u>American Ridge Rd</u>	
		City <u>Kendrick</u>	

(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/FILTER PACK			AMOUNT		METHOD
Material	From	To	Sacks or Pounds		
Casing Seal	0	50'	10		overbore
Bentonite					

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
8"	+1	138'	40	Steel	☒	☐	☒	☐
4"	-4 1/2	297'	100	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method Saw Cut☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
297	297'	40	36	4"	PVC	☐	☒
217	257'	40	72	4"	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

150 ft. below ground Artesian pressure _____ lb.Depth flow encountered _____ ft. Describe access port or control devices: Bolted 8W well cap

11. WELL TESTS:

- ☐ Pump ☐ Bailer

Yield gal./min.	Drawdown	Pumping Level	Time
Est 55 gpm			
C-PM's			

Water Temp. ColdBottom hole temp. ColdWater Quality test or comments: water looks good

Depth first Water Encountered _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
10"	0	77	Brown Clay	
"	77	90	Clay mixed with Rock	
"	90	99	Soft Rock Material	
"	99	109	Basalt - Med	
"	109	115	Soft Broken Basalt	
"	115	117	Basalt Med	
"	117	127	Soft Basalt	
"	127	135	Basalt - Broken very soft	
"	135	138	Basalt Hard	
6"	138	145	Basalt Hard some Fractures	
"	145	152	Basalt Porous very soft, broken	X
"	152	177	Basalt Porous med soft	
"	177	195	Basalt Porous soft	
"	195	212	Basalt Porous Broken very soft	
"	212	214	Basalt Hard	
"	214	220	Basalt Porous, Broken very soft	
"	220	241	Basalt very Porous, Broken, very soft	X
"	241	285	Basalt Porous Black, Broken, soft	X
"	285	289	Basalt Broken	X
"	289	298	Very Broken Basalt	X
"	298	301	Basalt Hard	
"	301	302	Basalt broken soft	

Completed Depth 297'

(Measurable)

Date: Started 12-3-96Completed 12-5-96

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 AQUA DRILLING & EXPLORATION INC.Firm No. 163Firm Official Scott M. BraunDate 12-5-96

and

Supervisor or Operator Scott M. Braun

Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES