

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

Claim ID: 87-10813Date Received: 5-15-2019Receipt No: N034437Claim Fee: 25 By: LW

RECEIVED

MAY 15 2019

DEPT. OF WATER RESOURCES

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

1. Name of claimant(s) Don & Bonnie Nelson Phone (208) 882-8793Mailing address 3421 Lenville Rd. Moscow ID Zip 83843
Street or Box City StateEmail address (optional) dne.moscow.com2. Date of priority: (Only one per claim) July 1 1972 (Explain priority date selected in Remarks)
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 39N, Range 5W, Section 16,
NE 1/4 of SE 1/4, or Govt. Lot _____ BM, County of Latah;Parcel no. RP01840001011A

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 replaced in 1995

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 0.04 cfs (☒ or AFY ()
Month/Day Month/Day

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 cfs () or AFY ()

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)

D - 1 home & lawn

9. Location of place of use is: Township 39N, Range 5W, Section 16,
NE 1/4 of SE 1/4, Govt. Lot _____ BM, Parcel 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? 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 notices in the Palouse River Basin Water System 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) Donald E. Nelson Date: 5/15/20

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

_____ 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 _____



Identify

Identify from:

Parcels

[-] Parcels

[+] NELSON, BONNIE J

Location: 2,273,841.076 1,728,689.310 Meters

Field	Value
ACRES	0.6
ADDRESS1	3421 LENVILLE ROAD
ADDRESS2	
CITY	MOSCOW
COUNTY	Latah
ID	11148788
LEGAL1	SCHAPER OF LOTS 48 & 33
LEGAL2	0.677 AC LOT 11 NESE
LEGAL3	16 39 5
LEGAL4	
LEGAL5	
LEGAL6	
OWNER	NELSON, BONNIE J
P_ADDRESS	3421 LENVILLE RD
P_ZIPCODE	83843
PIN	RP01840001011A
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	2/20/2019
YEAR_BUILT	1972
ZIPCODE	83843

Form 238-7
7/94

MAY 22 1995

NORTH PLAIN REGION
LDWR



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 86-95-N-0016-000
Other IDWR No. _____

2. OWNER:

Name DON NELSON
Address 3242 LINCOLN ROAD
City MOSCOW State IN Zip 43843

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.


 Twp. 29 North ☐ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 16 1/4 NE 1/4 SE 1/4
 Gov't Lot _____ County LARAH

Address of Well Site SAME
City

(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	
CEMENTITE	0	19	6	OVER SIDE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 38
Was drive shoe seal tested? ☒ Y ☐ N How? ALL TEST

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	12	34	21 st	STEEL	☒	☐	☐	☐
6	4	120	25 th	ALU	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe Length of Tailpipe

9. PERFORATIONS/SCREENS

☒ Perforations Method SAW
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
100	120	1/2 x 1/4	90	6	ALC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

50 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: WELL SEAL
NESE 10 39N 5W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
50	—	140	1 hr

Water Temp. 54 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 DANIELLE RAILLON Firm No. 107

Firm Official D. K. Burns Date 5/18/95

and

Supervisor or Operator M. J. [Signature] Date 5/19/16

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES