

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: 87-10997Date Received: 6-5-2019Receipt No: N034727Claim Fee: 25.00 By: JD

RECEIVED

JUN 05 2019

IDWR / NORTH

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) Randy G. & Gayle J. Bryngelson Phone (208) 669 6565Mailing address 1016 Guernsey Cutoff Potlatch ID Zip 83855
Street or Box City StateEmail address (optional) rgbryngelson@gmail.com2. Date of priority: (Only one per claim) July 18/1978 (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 41 N, Range 4, Section 17,
SE 1/4 of SW 1/4, or Govt. Lot _____ BM, County of Latah;Parcel no. RP41N04W177047A

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.

Drilled well 305 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 0.04
Month/Day Month/Day cfs (☒) or AFY ()

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)

Domestic 1 Home

9. Location of place of use is: Township 41 N, Range 4, Section 17,
SE 1/4 of SW 1/4, Govt. Lot _____ BM, Parcel no. same
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):

Original well dug July 1978

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: 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) Randy A Bryngel Date: 6/2/2019

Cayle Bryngel Date: 6/2/2019

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 _____

WELL DRILLER'S REPORT

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>RANDY BRYNGELSON</u> Address <u>815 PINE POTATON, IDAHO</u> Owner's Permit No. <u>87-78-N-12</u>		7. WATER LEVEL Static water level <u>15</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature _____ ° F. Quality _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																																																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning)		8. WELL TEST DATA ☐ Pump ☒ Bailer ☐ Other Discharge G.P.M. <u>1 1/2</u> Draw Down <u>TOTAL</u> Hours Pumped <u>1</u>																																																																	
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole 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>8</td><td>0</td><td>2</td><td>TOP SOIL</td><td></td><td>X</td></tr><tr><td>8</td><td>2</td><td>20</td><td>CLAY BROWN</td><td></td><td>X</td></tr><tr><td>8</td><td>20</td><td>73</td><td>QUARTZ BROWN SOFT</td><td></td><td>X</td></tr><tr><td>8</td><td>73</td><td>159</td><td>QUARTZ BLUE</td><td></td><td>X</td></tr><tr><td>8</td><td>159</td><td>205</td><td>GRANITE DECOMPOSED</td><td></td><td>X</td></tr><tr><td>8</td><td>205</td><td>238</td><td>GRANITE HARD</td><td></td><td>X</td></tr><tr><td>8</td><td>238</td><td>263</td><td>GRANITE DECOMPOSED SOFT</td><td></td><td>X</td></tr><tr><td>8</td><td>263</td><td>291</td><td>GRANITE DECOMPOSED CAVEY</td><td></td><td>X</td></tr><tr><td>8</td><td>291</td><td>305</td><td>GRANITE DECOMPOSED SOFT</td><td></td><td>X</td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	8	0	2	TOP SOIL		X	8	2	20	CLAY BROWN		X	8	20	73	QUARTZ BROWN SOFT		X	8	73	159	QUARTZ BLUE		X	8	159	205	GRANITE DECOMPOSED		X	8	205	238	GRANITE HARD		X	8	238	263	GRANITE DECOMPOSED SOFT		X	8	263	291	GRANITE DECOMPOSED CAVEY		X	8	291	305	GRANITE DECOMPOSED SOFT		X
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4. METHOD DRILLED ☒ Cable ☐ Rotary ☐ Dug ☐ Other		 Idaho Department of Water Resources Water Resources Division																																																																	
5. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>305</u> feet Casing schedule: ☒ Steel ☐ Concrete Thickness <u>1/4</u> inches Diameter <u>8</u> inches From <u>1</u> feet To <u>24</u> feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet 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 _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet 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>24</u> Material used in seal ☐ Cement grout ☒ Puddling clay ☐ Well cuttings Sealing procedure used ☐ Slurry pit ☐ Temporary surface casing ☒ Overbore to seal depth																																																																			
6. LOCATION OF WELL Sketch map location must agree with written location. <u>87</u> <table border="1"><tr><td>N</td><td></td><td></td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>LATAH</u> <u>SE 1/4 SW 1/4 Sec. 17 T. 41 N. 4 R. 4 NW</u>				N			W		E				S			10. Work started <u>7-1-78</u> finished <u>7-18-78</u>																																																			
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11. DRILLER'S CERTIFICATION Firm Name <u>RAY M. McPHERSON NISL DRILLING</u> Firm No. <u>190</u> Address <u>RR1 BOX 138 PAIDUSE, WASH.</u> Date <u>8-13-78</u> Signed by (Firm Official) <u>Ray M. McPherson</u> and (Operator) <u>Ray M. McPherson</u>																																																																			