

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: 87-11585Date Received: 8-19-2019Receipt No: 2035410Claim Fee: 25.00 By: SL

RECEIVED

AUG 19 2019

IDWH/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

- Name of claimant(s) Patty Vettus Phone (208) 882
Mailing address P.O. Box 70 Viola ID Zip 83872
Street or Box City State
Email address (optional) PattyVettus@gmail.com
- Date of priority: (Only one per claim) 7-20-2003 (Explain priority date selected in Remarks)
Month/Day/Year (YY r Y)
- Source of water supply (Check one) Ground Water (☒) or Other () (a) _____
which is tributary to (b) N/A
- Location of point of diversion is: Township 40N, Range 5W, Section 5,
SE 1/4 of NW 1/4, or Govt. Lot _____ BM, County of Latah;
Parcel no. 40N05W054211
Additional points of diversion, if any: N/A
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.
Well, Pump, Pipeline to home and Lawn irrigation
- 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 Month/Day to 12/31 Month/Day amount 0.03 cfs ☒ or AFY ()
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.03 cfs (☒) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
one home Lawn irrigation

9. Location of place of use is: Township 40N, Range 5W, Section 5,
SE 1/4 of NW 1/4, Govt. Lot _____ BM, Parcel no. 40N05W054211
If different than shown in Item 4

for (check one) Domestic ☒ Stock () Domestic and Stock ()

Additional places of use, if any N/A

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

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) Patricia Vetter Date: 8/16/19

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

_____ 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
 - [+] VETTRUS, PATTY



Location: 2,271,719.150 1,741,951.427 Meters

Field	Value
ACRES	39
ADDRESS1	PO BOX 70
ADDRESS2	
CITY	VIOLA
COUNTY	Latah
ID	11246111
LEGAL1	39.13 AC TAX #6162
LEGAL2	5 40 5
LEGAL3	
LEGAL4	
LEGAL5	
LEGAL6	
OWNER	VETTRUS, PATTY
P_ADDRESS	1180 FOUR MILE RD
P_ZIPCODE	83872
PIN	RP40N05W054211
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	6/3/2019
YEAR_BUILT	2005
ZIPCODE	83872

Identified 1 feature

 Table Of Contents  Identify

WELL DRILLER'S REPORT

RECEIVED

AUG 05 2003

IDWR/North

Office Use Only

Well ID No. _____

Inspected by _____

Twp _____ Rge _____ Sec _____

1/4 1/4 1/4

Lat: _____ Long: _____

1. WELL TAG NO. D

DRILLING PERMIT NO.

Water Right or Injection Well No.

2. OWNER:

Name

Address

City

State

Zip

3. LOCATION OF WELL by legal description:

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

Twp. 40

North ☒

or

South ☐

Rge. 5

East ☐

or

West ☒

Sec. 5

1/4

SE 1/4

NW 1/4

Gov't Lot

10 acres

Salah

160 acres

Lat:

Long:

Address of Well Site

City

(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
Bentonite	0	183	logs Dry	

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
6" + 2	18	280		Steel	☒	☐	☒	☐
4 1/2" - 10	250	100		PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe

Length of Tailpipe

Packer ☐ Y ☐ N Type

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method

Screen Type & Method of Installation

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-210	250	5X 1/4	100	4 1/2	PVC	☐	☒
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

1. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

6 ft. below ground

Artesian pressure _____ lb.

Depth flow encountered

ft. Describe access port or control devices:

Top of Well

40 N 5 W 5

12. WELL TESTS:

☐ Pump☐ Bailor☒ Air☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
12 gpm			

Water Temp. 45.0

Bottom hole temp. 45.0

Water Quality test or comments:

Good

Depth first Water Encounter 220

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	2	dirt		☒
2	6		clay		☒
6	16	43	decomposed granite		☒
6	43	48	med granite		☒
6	48	96	brn granite		☒
6	96	103	med granite gray		☒
6	103	215	brn granite		☒
6	215	225	med granite gray		☒
6	225	250	granite 5 gpm		☒
6	250	250	10, 12 gpm		☒

Completed Depth

250 ft

(Measurable)

Date: Started

June 28, 03

Completed

June 28, 03

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

Firm No. 125

Principal Driller

Mr. Whelan

Date

7/20/03

and

Driller or Operator II

Mr. Whelan

Date

7/20/03

Operator I

Mr. Whelan

Date

7/20/03

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.



NWNE 2

NENW 3

NW 1/4

87

45°N05W

House

Well

S 1/4

S 1/4

NWSE

NESW

NWSW