

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: 87-11810Date Received: 8-22-2019Receipt No: N035452Claim Fee: 25.00 By: JB

RECEIVED

AUG 22 2019

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

IDWR / NORTH

Where Daily Use is less than 13,000 gallons per day

Please type or print clearly

1. Name of claimant(s) Erin Burkett Phone (530) 848-7652Mailing address 315 S Catalina Ave Apt 11 Pasadena CA Zip 91106
Street or Box City StateEmail address (optional) erb.sca@gmail.com2. Date of priority: (Only one per claim) 08/13/16 (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) N/A4. Location of point of diversion is: Township 42 N, Range 04 W, Section 27,
SE 1/4 of SW 1/4, or Govt. Lot _____ BM, County of Latah;Parcel no. RP 42 N 04 W 27 66 27 A

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 8/13/16 (see attached report)
Well with a pump and spigot for use while camping fewer
than 3 weeks per year (it's an unstructured property where I do not live).

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For domestic purposes from 5/1 to 10/31 amount 0.01 cfs
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.01 cfs (☒) or AFY ()

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

Domestic use (drinking + washing) when camping on unstructured property.

9. Location of place of use is: Township 42N, Range 04W, Section 27,
SE 1/4 of SW 1/4, Govt. Lot _____ BM, Parcel no. same
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):
The well was drilled beginning 8/12/16 and completed 8/13/16 (well tag #0072239; see attached well report).

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)  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

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 _____

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT1. WELL TAG NO. D 0072239

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER: Erin BurkettName Erin BurkettAddress 315 S. Catalina AveCity Pasadena State CA Zip 91106

3. WELL LOCATION:

Twp. 42 North ☒ or South ☐ Rge. 4 East ☐ or West ☒Sec. 27 10 acres 1/4 SE 40 acres 1/4 SW 160 acres 1/4Gov't Lot _____ County LatahLat. 41° 56' 88" N (Deg. and Decimal minutes)Long. 116° 49' 10" W (Deg. and Decimal minutes)Address of Well Site 1241 Gold Hill RdCity Princeton

(Give at least name of road + Distance to Road or Landmark)

Lot _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
Bentonite (hole plug)	0	38	16 sacks	top down

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6"	0	38	250	Steel	☒	☐	☐	☒
4 1/2"	38	300	200	PVC	☐	☒	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 38'

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method skill sawManufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
260	300	1/8" x 1/4"	.5	4 1/2"	PVC	200

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 245 Static water level (ft) 200Water temp. (°F) 50 Bottom hole temp. (°F) _____

Describe access port _____

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
300	2	600

Test method:

Pump	Bailer	Air	Flowing artesian
☐	☐	☒	☐

Water quality test or comments: good

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
10	0	3	clay		☒
10	3	38	hard brown clay		☒
10	38	55	hard brown clay		☒
10	55	145	mid grey pott. ch. brklt		☒
10	145	170	soft grey pott. ch. brklt		☒
10	170	260	mid grey pott. ch. brklt		☒
10	260	285	soft grey pott. ch. brklt		☒
10	285	300	mid grey pott. ch. brklt		☒

Completed Depth (Measurable): 300Date Started: 8/12/10 Date Completed: 8/13/10

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 Brett Lindenkott Drilling Co. No. 709*Principal Driller Brett Lindenkott Date 9-8-16*Driller John Schuler Date 9-8-16

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.