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JUL 22 2021

Form No.42-1409-1 (Internet 5/17)

DEPT. OF WATER RESOURCES

**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 COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM**

CIVIL CASE NUMBER: 49576

Claim ID: 93-7690

Date Received: _____

Receipt No: _____

Claim Fee: _____ By: _____

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

Please type or print clearly

1. Name of claimant(s) Peter Prancun Phone (717) 314-9930
Mailing address 510 N. Duke St. Lancaster PA Zip 17602
Street or Box City State
Email address (optional) _____
2. Date of priority: (Only one per claim) 8/9/2006 (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. a. Location of point of diversion is: Township 46N, Range 05W, Section 2,
SW 1/4 of NW 1/4, Govt. Lot _____, BM, County of Benewah
Parcel no. RP46N05W023000
Additional points of diversion, if any: _____
If available, GPS Coordinates _____
b. If instream flow, beginning point of claimed instream flow is:
Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
Ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, 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 and pump to home

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD) (cfs) (acre-feet)

For Domestic purposes from 1/1 to 12/31 amount 0.04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.04 (cfs) and/or (b) _____ (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) _____

9. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
46N	05W	2							D										

Parcel no(s) RP46N05W023000

Total number of acres irrigated 1/2

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

11. Do you own the property listed above as place of use? Yes (✓) No ()

If your 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):

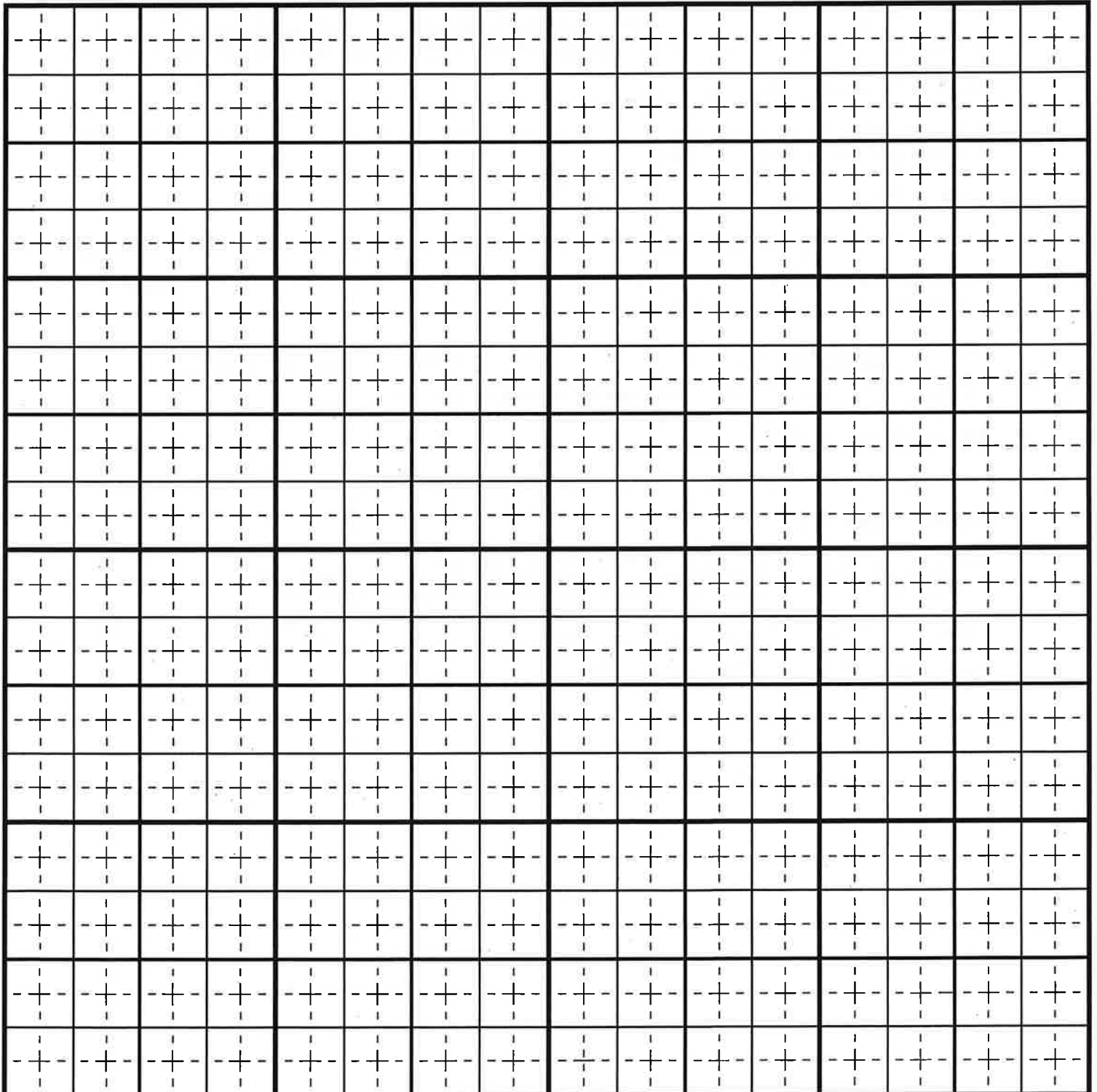
The well was completed on 8/9/2006 with the well driller report attached as proof of priority IDWR driller permit no. 0045121. Local address for home is 500 Eden Lane.

Name of claimant(s) Peter Prancun

Claim ID 93-7690

Map of Project: Attach aerial photograph or topographic map showing clearly the point of diversion, place of use, section number, township, and range number, unless unavailable. Otherwise sketch the elements above on the grid below.

Scale: 2 inches equals 1 mile



Name of claimant(s) Peter Prancun

Claim ID 93-7690

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 Coeur d'Alene-Spokane 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: 2

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: 7/9/21

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) Chris M. Bromley, will be acting as attorney at law on behalf of 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 7/19/2021

Address 380 S. 4th St., Ste. 103, Boise, ID 83702

Name of claimant(s) Peter Prancun

Claim ID 93-7690

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D DOO 45121
DRILLING PERMIT NO. 841260
Water Right or Injection Well No. _____

2. OWNER:

Name MARK KIDDER
Address PO Box 77
City Rockford State WA Zip 99030

3. LOCATION OF WELL by legal description:

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

Twp. 46 North ☒ or South ☐
Rge. 5 East ☐ or West ☒
Sec. 2 1/4 N/W 1/4 N/W 1/4
Gov't Lot _____ County BENEFIT

Lat: _____ Long: _____
Address of Well Site COUNTY LINE RD. 3mi. WEST OF 95
ON SOUTH SIDE City Plummer
(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
<u>Bentonite</u>	<u>0</u>	<u>60</u>	<u>12 SX</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 98

Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-98</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-20</u>	<u>-542</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-482</u>	<u>-542</u>	<u>3/4</u>	<u>36</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
<u>none</u>				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

210 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 510 ft. Describe access port or control devices: _____
Well Cap
46N SW 2

Office Use Only			
Well ID No.	_____		
Inspected by	_____		
Twp	Rge	Sec	
_____	_____	_____	
Lat: _____	Long: _____	_____	

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>60 gpm</u>	<u>Air lift from</u>	<u>542</u>	

Water Temp. 48° Bottom hole temp. _____

Water Quality test or comments: Clear no odor

Depth first Water Encounter 510

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>87</u>	<u>clay-Tan-w/soft</u>		
			<u>Broken Shale</u>		
	<u>87</u>	<u>98</u>	<u>Shale - Tan + Gray</u>		
<u>6"</u>	<u>98</u>	<u>160</u>	<u>Shale - Tan + Gray</u>		
	<u>160</u>	<u>360</u>	<u>Shale - Gray</u>		
	<u>360</u>	<u>510</u>	<u>Shale - Brown + Gray</u>		
	<u>510</u>	<u>542</u>	<u>Shale - Brown + Gray</u>		
			<u>Broken w/ water</u>		
			<u>60 G.p.m.</u>		

RECEIVED
SEP 21 2006
IDWR/North

Completed Depth 542 (Measurable)

Date: Started 8-7-06 Completed 8-9-06

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 ACTION Drilling inc. Firm No. 618

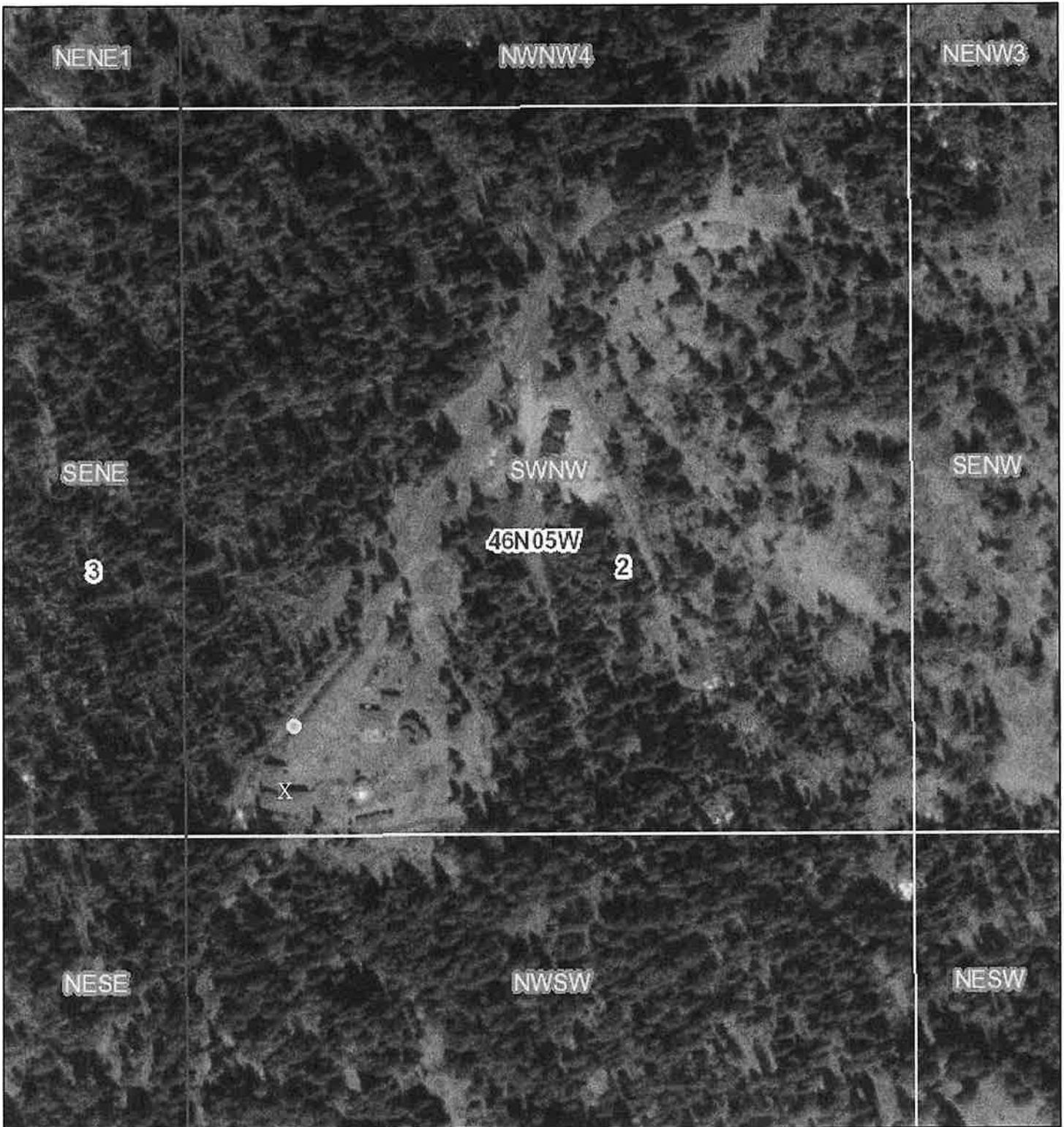
Principal Driller ALVIN CARRIS Date 9-5-06

and Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 9-5-06

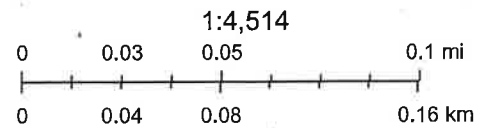
Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

Water Rights



7/7/2021, 9:10:34 AM

-  POD - Water Rights
-  Quarter Quarter
-  POU - Water Rights
-  Section
-  Township/Range



Esri, HERE, iPC, Idaho Department of Water Resources, Esri, HERE, Garmin, iPC, Maxar