

**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 CLARK FORK-PEND OREILLE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 69576

Ident. Number: 97-8531
Date Received: 4/12/2022
Receipt No: N038883
Claim Fee: \$2500
Received By: NS

RECEIVED

APR 12 2022

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**

1. Name of Claimant(s)

KAREN PUGH
165 BUCKSKIN FLAT RD
PRIEST RIVER ID 83856

Phone: (208) 448-1643

2. Date of Priority: 11/10/2020

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
57N	05W	14	SW SE		BONNER	

5. Description of diverting works:

WELL WITH PIPELINE TO HOME AND FROST FREE HYDRANTS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.01		
STOCKWATER	01/01	12/31	0.01		

7. Total Quantity Appropriated is:

0.01 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME
STOCKWATER USE FOR TWO HORSES

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	05W	14	SW		SE		

STOCKWATER within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	05W	14	SW		SE		

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:

DATE WELL COMPLETED AND WATER FIRST PUT TO BENEFICIAL USE.

13. Basis of Claim: Beneficial Use

14. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the CLARK FORK-PEND OREILLE River Basin Adjudication." (b.) I/We do ____ do not X 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:

4/12/22

Date:

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D D0086493

Drilling Permit No. 890588

Water right or injection well # _____

2. OWNER: Kevin & Karen Pugh

Name _____

Address 325 Buckskin Flat Rd.

City Priest River State ID Zip 83856

3. WELL LOCATION:

Twp. 57N North ☒ or South ☐ Rge. 05W East ☐ or West ☒
Sec. 14 1/4 SW 1/4 SE 1/4

Gov't Lot _____ County Bonner

Lat. 48 ° 17 . 044 (Deg. and Decimal minutes)

Long. 116 ° 55 . 421 (Deg. and Decimal minutes)

Address of Well Site Buckskin Flat Rd

City Priest River

Lot 2 Blk. 1 Sub. Name Pugh Acres

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	0	38	1300 lbs.	Overbore

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner Threaded Welded
6"	+2	245	.250	Steel	☒ ☐ ☐ ☒
4"	-10	640	.200	PVC	☐ ☒ ☐ ☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 245'

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Skil saw

Manufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
620	640	1/4x8	88	4"	PVC	Sch. 40

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
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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) 300 Static water level (ft) 300

Water temp. (°F) Cold Bottom hole temp. (°F) Cold

Describe access port Welded steel cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	1.5	60

Test method:

Pump	Ballor	Air	Flowing artesian
☐	☐	☒	☐

Water quality test or comments: _____

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	Top Soil		X
10	3	38	Tan Clay		X
8	38	60	Tan Clay		X
8	60	130	Gray Clay		X
8	130	185	Gray & Tan Clay		X
8	185	210	Tan Clay & Soft Shale		X
8	210	245	Broken Tan Shale		X
6	245	295	Gray Shale		X
6	295	330	Gray & Green Shale w/ 1.5 gpm	X	
6	330	470	Gray Shale		X
6	470	640	Dark Gray & Black Shale		X

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NOV 23 2020

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Completed Depth (Measurable): 640'

Date Started: Nov 5, 2020 Date Completed: Nov 10, 2020

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 H2O Well Service Inc. Co. No. 448

*Principal Driller Tom Ruppert Date 11-11-2020

*Driller Steve McGee Date 11-11-2020

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.