

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

Claim ID: 97-9262Date Received: 6-13-22Receipt No: N039990Claim Fee: \$25.00 By: JA

RECEIVED

JUN 13 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

Please type or print clearly

- Name of claimant(s) Steven W & Jeanne L McDaniel Phone (208) 448 0234
Mailing address Po box 1862 Priest River ID Zip 83856
Street or Box City State
Email address (optional) jleemc41e@yahoo.com
- Date of priority: (Only one per claim) 09-20-2004 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water (☒) or Other (☒) (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 57 North, Range 4 West, Section 30 Southwest,
_____ 1/4 of Southeast 1/4, or Govt. Lot _____ BM, County of Bonner County;
Parcel no. Rp042090000010A SW 1/4 of the SE 1/4 of the
SE 1/4 of Section 30
Additional points of diversion, if any: _____
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, 1/2 HP pump well tag # D0033896
power provided to property on 9-20-2004, water ran initially to shop
while home was being built
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from January 1 to December 31 amount 0.04 cfs (☒) or AFY ()
For Stockwater purposes from January 1 to December 31 amount 0.02 cfs (☒) or AFY ()
- Total quantity claimed 0.06 cfs (☒) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic 1: Stockwater 16-24 head of cattle 6-8 pigs 24 chickens

9. Location of place of use is: Township 57 N, Range 4W, Section 30 SW 1/4 of SE
SE 1/4 of SE 1/4, Govt. Lot _____ BM, Parcel no. _____
If different than shown in Item 4
for (check one) Domestic () Stock () Domestic and Stock (X)

Additional places of use, if any _____

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

11. Do you own the property listed above as place of use? Yes (X) 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.
spring or None ()

13. Remarks (include an explanation of the priority date selected):
Priority date is when power became available (installed) on property. Well was drilled 07-07-2004.

14. Basis of claim (check one) Beneficial Use (X) 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 Clark Fork-Pend Oreille 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: 3

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) [Signature] Date: 5-26-22

Jeanne L McDaniel Date: 26 May 2022

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)

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 REPORT

Office Use Only		
Inspected by _____		
Twp _____	Rge _____	Sec _____
_____ 1/4	_____ 1/4	_____ 1/4
Lat: : : _____	Long: : : _____	

1. WELL TAG NO. D0033896

DRILLING PERMIT NO 819487

Other IDWR No. _____

2. OWNER:

Name Steve McDaniel

Address PO Box 489

City Electric City State WA Zip 99123

3. LOCATION OF WELL by legal description:

N		Twp <u>57N</u>	North ☒ or South ☐
Rge <u>004</u>		East ☐ or West ☒	
Sec <u>30</u>		1/4 SE 1/4 SE 1/4	
Gov't Lot _____		County <u>Bonner</u>	
Lat _____		Long _____	
Address of Well Site: (see next line)			

Peninsula Loop Road on Corner Where Road Turns North City Priest River

Lot _____ Blk _____ Sub. Name (see next line) _____

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/FILTER PACK			Amount	Method
Material	From	To	Sacks/Lbs	
Bentonite Grans	0	20	15 sacks	Dry Pour

Drive Shoe Used? ☐ Y ☒ N Shoe Depth(s) _____

Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6	+2	182	0.250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations? Method Rotary Wheel

☐ Screens? Screen Type _____

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
173	178	1/4	75	1/4	Steel	☒	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

147 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 159 ft. Describe access port or

control devices: Steel Cap Welded

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
15 to 17	100%	182	1 Hour

Water Temp. _____ Cold Bottom hole temp. _____ Cold

Water Quality test or comments: (below) Depth first Water Encountered 159

Cold, Clear, and No Smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water	
				Y	N
8	0	3	Topsoil	☐	☒
8	3	6	Sand and Gravel	☐	☒
8	6	8	Clay: Brown	☐	☒
8	8	16	Boulders	☐	☒
8	16	75	Clay with sand and gravel	☐	☒
8	75	155	Clay: Gray	☐	☒
8	155	159	Boulders	☐	☒
8	159	178	Sand and Gravel	☒	☐
8	178	182	Clay: Brown	☐	☒
				☐	☐
				☐	☐
			15 to 17 GPM at 159 to 178 feet	☐	☐

RECEIVED
JUL 23 2004
IDWR North

Completed Depth 182 (Measurable)

Date: Started 7/6/04 Completed 7/7/04

13. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name United Drilling Inc.

Firm No 414

Firm Official and _____

Date 7/7/04

Supervisor or Operator Jason C. Beckham

Date 7/7/04

57N 4W 30



Please call 208-263-5141 or 1-800-326-9594 if you have any questions.

VERIFICATION OF SERVICE

Customer Name: STEVEN OR JEANNE MCDANIEL

Account Number: 108616

Physical Address: 905 PENINSULA LOOP, PRIEST RIVER, ID 83856

Connect Date: 9/20/2004 **Service:** ELECTRIC

Member Service Specialist: CGILMORE **Extension** 121

State of Idaho
Department of Water Resources
Application For Permit



-  PLS Sections
-  Quarter Quarters
-  Taxlots

0 0.0275 0.055 0.11 Miles

 Point of Diversion - Well

 Place of use



Tax parcel information provided by Bonner County.