

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

RECEIVED
AUG 11 2022
DEPARTMENT OF
WATER RESOURCES

Ident. Number: ~~95-18343~~ 95-18345
Date Received: 8/1/2022
Receipt No: N040677
Claim Fee: \$25.00
Received By: [Signature]

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)

CLINTON HAMILTON
PO BOX 1841
SPIRIT LAKE ID 83869

Phone: (760) 703-1497

AND/OR

LYNNETTE HAMILTON
PO BOX 1841
SPIRIT LAKE ID 83869

Phone: (760) 703-1497

2. Date of Priority: 1/19/2021

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
54N	04W	29	NE NW		BONNER	

5. Description of diverting works:

WELL WITH PIPE TO HOME

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.04		
STOCKWATER	01/01	12/31	0.02		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR 1 HOME

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
54N	04W	29	NE		NW		

STOCKWATER within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
54N	04W	29	NE		NW		

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 WAS COMPLETED AND PUT TO BENEFICIAL USE

13. Basis of Claim: Beneficial Use

14. Signature(s)

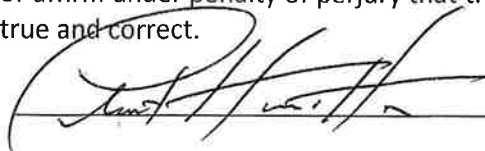
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

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: 8-1-2022

Date: _____

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0086671

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER:

Name Clint Hamilton

Address 522 Ediah Road

City Spirit Lake State ID Zip 83869

3. WELL LOCATION:

Twp. 54 North ☒ or South ☐ Rge. 04 East ☐ or West ☒

Sec. 29 1/4 NE 1/4 NW 1/4

Gov't Lot _____ County Bonner

Lat. 48 ° 00.2422 N (Deg. and Decimal minutes)

Long. 116 ° 51.7579 W (Deg. and Decimal minutes)

Address of Well Site 522 Ediah Rd.

City Spirit Lake

(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 Chips	0	20	600 lbs.	Dry Pour

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 325' Static water level (ft) 300'

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

Describe access port Welded Steel Cap

Well test: _____ Test method: _____

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
NA	20+ gpm	240	☐	☐	☒	☐