

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: ~~97-8393~~ 97-7087B

Date Received: 3/01/2022

Receipt No: N038524

Claim Fee: \$25.00 By: JA

RECEIVED**MAR 01 2022****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****IDWR / NORTH****Please type or print clearly**

- Name of claimant(s) Oscar R. and/or Gaye L. Oscarson Phone (208) 290-8292
Mailing address 4220 Freeman Lake Rd Oldtown ID 83822
Street or Box City State Zip
Email address (optional) gayeoscarson@hotmail.com
- Date of priority: (Only one per claim) 1981 (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 56N, Range 06W, Section 12,
SW 1/4 of SE 1/4, or Govt. Lot 4 BM, County of Bonner;
Parcel no. RP56N06W126750A
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.
Original well on neighboring property to the west supplied home. New well, D0041120 drilled to replace shared well. This is the only well supplying the home. We replaced pump recently, and the well produces much better.
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from 1/1 to 12/31 amount .04 cfs (✓) or AFY ()
For _____ purposes from _____ to _____ amount _____ cfs (✓) or AFY ()
- Total quantity claimed .04 cfs (✓) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
1 home, 1 shop

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MAR 11 2022

9. Location of place of use is: Township 56N, Range 06W, Section 12,
SW 1/4 of SE 1/4, Govt. Lot 4 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? Bonner

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):
This home was originally part of license 97-7087. When we drilled our new well in 2006, we were bought out of the license, and now we have our own complete separate system.

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 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: 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: 3/01/2022

 Date: 3/01/2022

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

_____ of _____,
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 _____

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MAR 11 2022

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Insepc
TWD.
Lat.

Location Corrected by IDWR To:
T56N R05W Sec. 12 SESWSW
By: erafn 2010-10-14

1. WELL TAG NO. D 0041120
DRILLING PERMIT NO. 838012
Other IDWR No.

2. OWNER

Name OSCAR OSCARSON
Address 4220 FREEMAN LAKE ROAD
City PRIEST RIVER State ID Zip 83856

3. LOCATION OF WELL by legal description
Sketch map location must agree with written location.

W		E		S	
1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24

Twp. 56 North or South
Rge. 6 East or West
Sec. 12 1/4 SW 1/4 SW 1/4
Gov't Lot County BONNER
Lat. Long.

Address of Well
SAME AS ABOVE City Priest River
(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 Tool ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

SEAL / FILTER PACK			AMOUNT	Method
Material	From	To	Sacks or pounds	
Bentonite Slurry	0'	19'	4 sacks	Overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depths(s) 240'
Was drive shoe seal tested? ☐ Y ☒ N How? N/A

8. Casing / Liner

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1'	229'	0.25	Steel	☒	☐	☒	☐
4"	20'	600'	0.160	PVC	☐	☒	☐	☐

Length of Headpipe N/A Length of Tailpipe N/A

9. PERFORATIONS / SCREENS

Perforations Method SKILSAW
Screens Screen Type N/A

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
540'	600'	1/8	100	4"	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE
290' ft. below ground Artesian pressure N/A lb.

Depth flow encountered N/A ft. Describe access port or
control devices: N/A

11. WELL TESTS

☐ Pump ☐ Bailer ☒ Air ☐ Flowing

Yield Gal. / Min.	Drawdown	Pumping Level	Time
3		600'	1 hour

Water Temp. 52 Bottom Hole Temp. N/A
Water Quality test or comments: GOOD
Depth first Water 496'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	18	SAND GRAVEL BOULDERS		
6	18	84	SAND BROWN		
6	84	166	CLAY BROWN		
6	166	239	CLAY GRAY		
6	239	496	SHALE GRAY MEDIUM		
6	496	497	SHALE FRACTURED		
6	497	600	SHALE DARK GRAY MEDIUM		

Completed Depth 600' (Measurable)
Date Started 1-09-06 Completed 1-13-06

13. DRILLER'S CERTIFICATION

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

Company Name Intermountain Drilling Firm No. 513

Firm Official [Signature] Date 2-8-06
and [Signature]
Driller or Operator [Signature] Date 2-8-06
(Sign once if Firm Official & operator)

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MAR 11 2022