

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

RECEIVED

OCT 17 2022

IDWR / NORTH

Ident. Number: 97-9584

Date Received: 10/17/2022

Receipt No: N041538

Claim Fee: \$25.00

Received By: fe

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)

JEREMY OSCARSON
3408 FREEMAN LAKE RD
OLDTOWN ID 83822

Phone: (208) 659-3325

2. Date of Priority: 5/18/1999

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	06W	12	SE SE		BONNER	

5. Description of diverting works:

WELL WITH PUMP AND PIPED TO PLACES OF USE

6. Water is used for the following purposes:

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

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR 2 HOMES

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	06W	12	SE		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 WAS COMPLETED PER WELL DRILLERS REPORT

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:

10-17-22

Date:

Form 2007
11/97

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

77190

IDWR/North

1. WELL TAG NO. D 0010046

DRILLING PERMIT NO. 97-99-N-13

Other IDWR No.

2. OWNER:

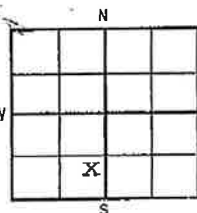
Name Ronnie Oscarson

Address 3418 Freeman Lake Road

City Oldtown State ID Zip 83822

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 56 North ☒ or South ☐
Rge. 06 East ☐ or West ☒
Sec. 12 1/4 SE 1/4 SW 1/4

Gov't Lot County Bonner

Lat: Long:

Address of Well Site 3418 Freeman Lk. Rd.

City Oldtown

(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/FILTER PACK			AMOUNT		METHOD
Material	From	To	Sacks or Pounds		
Bentonite	0	19	3sacks		Overbore

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

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1	394	250	steel	☒	☐	☒	☐
4"	390	575	160	PVC	☐	☐	☐	☐

Length of Headpipe Length of Tailpipe

9. PERFORATIONS/SCREENS

Perforations Method skillsaw
Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
515	575	1/8"	100	4"	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

260 ft. below ground Artesian pressure lb.
Depth flow encountered 151 ft. Describe access port or control devices: welded well cap

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

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
7gpm		575	1hr.

Water Temp. 49 Bottom hole temp.

Water Quality test or comments: clear

Depth first Water Encounter 151'

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	19	Gravel & cobbles		X
6	19	37	Sand & gravel		X
6	37	143	Fine sand		X
6	143	151	Pea gravel		X
6	151	273	Fine sand w/clay lenses	X	
6	273	347	Clay w/sand lenses		X
6	347	393	Cemented gravel		X
6	393	397	Broken shale/gray		X
6	397	438	Shale/gray/frac 2 1/2 gpm	X	
6	438	559	Shale/gray/med		X
6	559	575	Shale/gray 4 1/2 gpm	X	

Completed Depth 575' (Measurable)
Date: Started 5-12-99 Completed 5-18-99

13. DRILLER'S CERTIFICATION

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

Company Name Intermountain Drilling Firm No. 513

Firm Official Date 6-23-99

and Driller or Operator Date 6-23-99

(Sign once if Firm Official & Operator)

56 N 6 W 12

FORWARD WHITE COPY TO WATER RESOURCES