

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: 97-9762
Date Received: 10/24/2023
Receipt No: NOV 16 2023
Claim Fee: 825.00
Received By: LS

RECEIVED
NOV 16 2023
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)

LANCE A BARNES
338 SHAW RD
PRIEST RIVER ID 83856-9543

Phone: (208) 306-9049

AND/OR

LORINDA R BARNES
338 SHAW RD
PRIEST RIVER ID 83856-9543

Phone: (208) 306-9049

2. Date of Priority: 5/20/2014 1920

3. Source: 5/24/2014 LB
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	04W	17	SW SW		BONNER	

5. Description of diverting works:

WELL WITH PUMP AND PIPE TO PLACE 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	0.04		
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:

STOCKWATER USE FOR MIXED STOCK
DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	04W	17	SW		SW		

STOCKWATER same as DOMESTIC

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:

97-9761 INSTREAM STOCKWATER

12. Remarks:

Priority Date Explanation:

DATE WELL COMPLETED PER WELL DRILLERS REPORT

13. Basis of Claim: Beneficial Use

14. Signature(s)

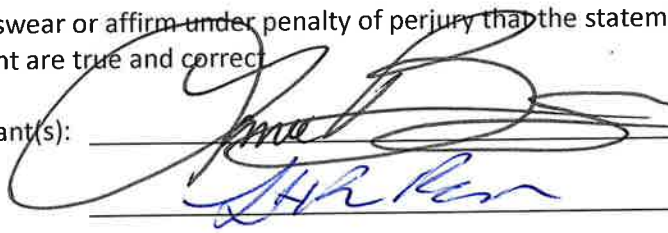
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the CLARK FORK-PEND OREILLE River Basin Adjudication." (b.) I/We do ☐ do not ☐ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 2

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:

11/7/2023

Date:

11/7/2023

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 61962
Drilling Permit No. 871878
Water right or injection well # _____

2. OWNER:
Name Lance Barnes
Address 338 Shaw Rd
City Priest River State ID Zip 83856

3. WELL LOCATION:
Twp. 56 North ☒ or South ☐ Rge. 4 East ☐ or West ☒
Sec. 17 1/4 SW 1/4 SW 1/4
Gov't Lot _____ County Bonner
Lat N 48 ° 11.842 (Deg. and Decimal minutes)
Long W 116 ° 52.046 (Deg. and Decimal minutes)
Address of Well Site Same City Priest River
(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
<u>Bentonite</u>	<u>0</u>	<u>38</u>		

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
<u>6"</u>	<u>+1</u>	<u>81</u>	<u>250</u>	<u>Steel</u>	☒	☐	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 81

9. PERFORATIONS/SCREENS:
Perforations ☐ Y ☐ N Method _____
Manufactured screen ☒ Y ☐ N Type Stainless Steel
Method of installation Telescoping

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
<u>80</u>	<u>95</u>	<u>12</u>		<u>5"</u>	<u>Stainless Steel</u>	

Length of Headpipe 2' Length of Tailpipe _____
Packer ☒ Y ☐ N Type K Packer

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
<u>WOWE</u>				

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) 35 Static water level (ft) 25'
Water temp. (°F) 44 Bottom hole temp. (°F) 44
Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
<u>60</u>	<u>12+</u>	<u>4 hrs</u>	☒	☐	☐	☐

Water quality test or comments: Clear

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
<u>10</u>	<u>0</u>	<u>38</u>			
<u>6</u>	<u>38</u>	<u>95</u>			
	<u>0</u>	<u>2</u>	<u>Topsoil</u>		
	<u>2</u>	<u>35</u>	<u>Sand & cobbles</u>		
			<u>Surface Water wet Sand</u>		☒
			<u>No Measurable amt.</u>		
	<u>35</u>	<u>48</u>	<u>Dirty Dry Sand</u>		
	<u>48</u>	<u>70</u>	<u>Dirty Sand Hard Paving</u>		
			<u>PIPE</u>		
	<u>70</u>	<u>81</u>	<u>Fine Sand & clay</u>		
	<u>81</u>	<u>96</u>	<u>Water Sand</u>		

208-263-5974

Mark Pitts
Robin Pitts

Serving
North Idaho
Over 20 Years



DRILLING • PUMPS • WATER TREATMENT
Complete Systems • From the Well To The House

435 Woodview Rd. • Sandpoint, ID 83864

Completed Depth (Measurable): 95'
Date Started: 5-12-14 Date Completed: 5-20-14

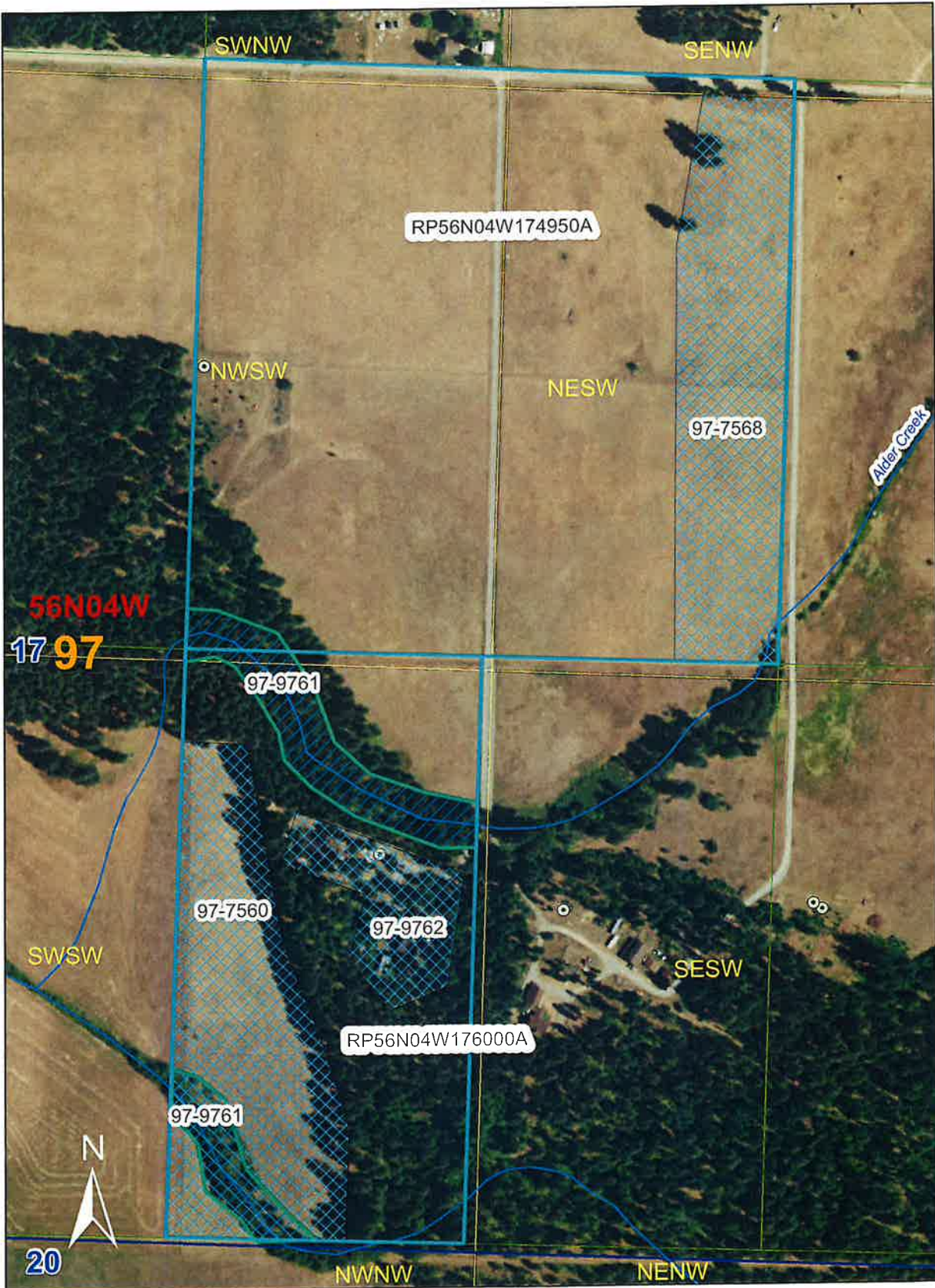
14. DRILLER'S CERTIFICATION:
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Company Name AAA Sweetwater Drilling Inc Co. No. 509
Principal Driller Mark Pitts Date 6-20-14

* Driller _____ Date _____
* Operator II _____ Date _____
Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

CFPRBA PARCEL DESCRIPTION

97-7560, 97-7568, 97-9761, 97-9762



2021 AERIAL PHOTO