

**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: 97-9841
Date Received: 8/30/2024
Receipt No: N044950
Claim Fee: \$25.00
Received By: Ja

RECEIVED

AUG 30 2024

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)

MULLEN LIVING TRUST
3635 FREEMAN LAKE RD
OLDTOWN ID 83822

Phone: (509) 590-8488

2. Date of Priority: 6/15/2022

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

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

5. Description of diverting works:

WELL WITH PIPELINE 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	0.01		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	06W	12	NE		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:

ALSO HAVE THREE ADDITIONAL TINY HOMES ON THE PROPERTY THAT ARE USED FOR COMMERCIAL PURPOSES. WILL APPLY FOR PERMIT FOR THAT ADDITIONAL USE.

12. Remarks:

Priority Date Explanation:

DATE WELL COMPLETED AND FIRST 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 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.

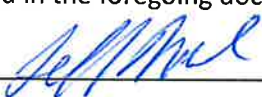
Number of attachments: 2

For Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

<u>TRUSTEE</u>	of	<u>MULLEN LIVING TRUST</u>
Agents 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 8-30-24

Printed Name of Authorized Agent JEFF MULLEN

Identify

Identify from: Tax Parcels

Tax Parcels

MULLEN LIVING TRUST

Location: 2,275,418.082 1,894,849.287 Meters

Field	Value
ID	17329737
UPDATED	7/6/2024
PIN	RP031160000020A
OWNER	MULLEN LIVING TRUST
ADDRESS1	3635 FREEMAN LK RD
ADDRESS2	
CITY	OLDTOWN
STATE	ID
ZIPCODE	83822
P_ADDRESS	22 SPARK WAY
P_ZIPCODE	83822
SUB_NAME	
LEGAL1	12-56N-6W MULLEN'S FREEMAN LAKE LOTS LOT 2
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	9.8
COUNTY	Bonner
SOURCE	<null>
YEAR_BUILT	2022
ParcelCount	1
SHAPE	Polygon

Identified 1 feature

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

RECEIVED

JUN 27 2022

IDWR / NORTH

1. WELL TAG NO. D 0094054
Drilling Permit No. 905605

Water right or injection well # _____

2. OWNER:

Name JEFF MULLEN - MULLEN LIVING TRUSTAddress 3635 FREEMAN LAKE RD.City OLDTOWN State ID Zip 83822

3. WELL LOCATION:

Twp. 36 North ☒ or South ☐ Rge. 6 East ☐ or West ☒Sec. 17 1/4 NE 1/4 S/E 1/4Gov't Lot _____ County BONNERLat. 48 ° 12.857 (Deg. and Decimal minutes)Long. -117 ° 01.428 (Deg. and Decimal minutes)Address of Well Site _____ City SAME

(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 ft³) Placement method/procedureCEMENT 0 38 1350 LBS TEMP. CASINGCHIP _____ _____ _____ DRY POUR

8. CASING/LINER:

Diameter (nominal) From (ft) To (ft) Gauge/Schedule Material Casing Liner Threaded Welded

6 12 53 25" STEEL ☒ ☐ ☐ ☒4 20 440 54" PVC ☐ ☒ ☒ ☐_____ _____ _____ _____ ☐ ☐ ☐ ☐_____ _____ _____ _____ ☐ ☐ ☐ ☐Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 53'

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____Manufactured screen ☒ Y ☐ N Type PVCMethod of installation SET ON BOTTOM

From (ft) To (ft) Slot size Number/ft Diameter (nominal) Material Gauge or Schedule

460 440 .020" 4 4" PVC 54" 40

_____ _____ _____ _____ _____ _____

_____ _____ _____ _____ _____ _____

_____ _____ _____ _____ _____ _____

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material From (ft) To (ft) Quantity (lbs or ft³) Placement method

_____ _____ _____ _____ _____

_____ _____ _____ _____ _____

_____ _____ _____ _____ _____

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) 155 Static water level (ft) 130Water temp. (°F) COLD Bottom hole temp. (°F) COLDDescribe access port BOLT ON CAP

Well test: _____ Test method: _____

Drawdown (feet) Discharge or yield (gpm) Test duration (minutes) Pump Bailer Air Flowing artesian

460 3 90 ☐ ☐ ☒ ☐Water quality test or comments: GOOD

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

12 0 1 TOP SOIL _____ X

_____ 1 9 SANDY CLAY & COBBLES _____

_____ 9 36 SANDY CLAY & GRAVEL _____

_____ 36 38 SAND _____

8 38 48 SAND _____

_____ 48 53 SOFT DECOMPOSED SHALE _____

6 53 101 FIRM DECOMPOSED SHALE _____

_____ 101 155 GRAY SHALE W/ BROWN _____

_____ 155 333 SHALE W/ FRACTURES 1 GPM X

_____ 333 378 SHALE W/ FRACTURES 1 GPM X

_____ 378 460 SHALE W/ FRACTURES 1 GPM X

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208-263-5974

Mark Pitts
Robn PittsServing
North Idaho
Over 20 YearsDRILLING • PUMPS • WATER TREATMENT
Complete Systems • From the Well To The House

435 Woodview Rd. • Sandpoint, ID 83864

Completed Depth (Measurable): 460'Date Started: 6/10/22 Date Completed: 6/15/22

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 SWEETWATER DRILLING Co. No. 389Principal Driller Mark Pitts Date 6-22-22Driller [Signature] Date 6/15/22

Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.