

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

RECEIVED

MAY 22 2023

DEPARTMENT OF
WATER RESOURCES

DISTRICT COURT - CSRBA	
Fifth Judicial District	
County of Twin Falls - State of Idaho	
FEB 08 2023	
CIVIL CASE NUMBER: 49576	
By _____	Clerk
_____	Deputy Clerk

Ident. Number: 95-18413

Date Received: 5-22-23

Receipt No: C116311

Claim Fee: \$25.00

Received By: VH

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)

THE TWIST LIVING TRUST
489 SONGBIRD WAY
SPIRIT LAKE ID 83869

Phone: (805) 704-5059

2. Date of Priority: 5/7/2020

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
54N	04W	21	NE SE		BONNER	

5. Description of diverting works:

WELL WITH PUMP 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		

7. Total Quantity Appropriated is:

0.04 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
54N	04W	21	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:

12. Remarks:

Priority Date Explanation:

DATE WELL WAS PUT INTO SERVICE

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 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>The Twist 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	<u>[Signature]</u>	Date	<u>2/3/23</u>
Printed Name of Authorized Agent	<u>Sandra Twist</u>		

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0084540

Drilling Permit No. 893876
Water right or injection well # _____

2. OWNER:

Name Larry McCall
Address 3199 N. Fort Beale Rd.
City Kingman State AZ Zip 86409

3. WELL LOCATION:

Twp. 54 North ☒ or South ☐ Rge. 04 East ☐ or West ☒
Sec. 21 1/4 NE 1/4 SE 1/4

Gov't Lot _____ County Bonner
Lat. 48 ° 00.7365 N (Deg and Decimal minutes)
Long. 116 ° 49.8673 W (Deg and Decimal minutes)

Address of Well Site 7th parcel from corner of Barn Owl and Songbird
(Give at least name of road + Distance to Road or Landmark) City Spirit Lake

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

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
6"	+2	440	.250	Steel	☒	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) Ring Bit @ 440'

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Down Hole Air Perforator

Manufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
410	430	1/4x1	6	6"	Steel	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
NA				

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) 406' Static water level (ft) 340'
Water temp. (°F) Cold Bottom hole temp. (°F) Cold

Describe access port Welded Steel Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Test method:			
NA	50+ gpm	240	Pump	Bailer	Air	Flowing artesian
			☐	☐	☒	☐

Water quality test or comments: _____

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	20	Sand and Gravel		X
8"	20	390	Sand and Gravel		X
8"	390	406	Clay and Gravel		X
8"	406	440	Sand and Gravel	X	

RECEIVED

MAY 14 2020

DWR/NORTH

Completed Depth (Measurable): 440'

Date Started: 05/06/2020

Date Completed: 05/07/2020

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 Horsley Drilling, Inc.

Co. No. 632

*Principal Driller C. Mark Horsley

Date 05/13/2020

*Driller [Signature]

Date 05/13/2020

*Operator II Justin Durazo

Date 05/13/2020

Operator I _____

Date _____

* Signature of Principal Driller and rig operator are required.

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re CSRBA

Case No. 49576

Subcase 95-18413
(Insert water right number)

STANDARD FORM 4

MOTION TO FILE A LATE NOTICE OF
CLAIM

INSTRUCTIONS

This form is used to file a late Notice of Claim in a reporting area where the Director's Report has been filed. Forms may be obtained from the CSRBA Court, the Idaho Department of Water Resources (IDWR), or you may copy or reproduce this blank form.

The water right number for your late Notice of Claim must be indicated above in the blank space following "Subcase." To obtain your water right number, contact the Idaho Department of Water Resources. You must use a **separate form for each** late Notice of Claim.

By filing a Motion to File a Late Notice Claim, you certify that it is well-grounded in fact; is warranted by existing law or a good-faith argument for the extension, modification or reversal of existing law; and is not filed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation.

☒ I have read *CSRBA Administrative Order 1*, Rules of Procedure.

My name is Sandra Twist

My address is 499 Songbird Way
Spirit Lake, ID 83869

My phone number is: work _____ mobile 805-704-5059
Home _____

☐ I am an attorney representing _____

My name is _____

My address is _____

My phone number is _____

☒ I did not file a Notice of Claim to the use of water in the CSRBA because:

Our home was built in 2021 and we
never received a notice. ^{commencement}

☐ I filed a Notice of Claim and elected to defer judicial proceedings on my domestic or stock watering use. I desire to reinstate my Notice of Claim for domestic or stock watering use.

☐ I am providing legal and factual documentation for my claimed use of water. You must describe these documents and attach a readable copy. (You do not need to fill this out if you are reinstating a Notice of Claim for domestic or stock watering use, but you must attach a copy of your Notice of Claim.)

A Motion to File Late Notice of Claim will require a hearing before the Presiding Judge.

Follow these instructions regarding the hearing on the motion.

1. Contact the Clerk of the CSRBA Court at (208) 736-3011 to request a hearing date and time.
2. Fill in the following information:

This motion will be heard on 5/16/23 at 1:30 PST local time
(insert date and time)
at the CSRBA Courthouse, 253 Third Avenue North, Twin Falls, Idaho.

I have attached:

- ☒ A fully completed Notice of Claim (available from IDWR).
- ☒ A claim filing fee for a domestic and stock watering use. IDWR may charge this fee pursuant to I.C. §42-1414. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ 25⁰⁰.
- ☐ A claim filing fee and a late claim fee for those claims other than domestic or stock watering use for which a notice of claim was not filed. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ _____.



(Signature of person filing motion)

(Attorney signing in representative capacity)

INSTRUCTIONS FOR MAILING

You must mail the Motion, to the Clerk of the court. **FAX filings will not be accepted.**
You must also send a copy to all the parties listed below in the Certificate of Mailing.

CERTIFICATE OF MAILING

I certify that on Feb 6, 2023, I mailed the original and copies of this Motion, including all attachments, to the following persons:

1. Original to:

Clerk of the District Court
Coeur d'Alene-Spokane River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

2. Copies to:

IDWR Document Depository
PO Box 83720
Boise, ID 83720-0098

United States Department of Justice
Environment & Nat'l Resources Div
550 W Fort Street, MSC 033
Boise, ID 83724

Chief, Natural Resources Division
Office of Attorney General
State of Idaho
PO Box 83720
Boise, ID 83720-0010



Signature of Movant or attorney
mailing on Movant's behalf

FEB 13 2023

DEPARTMENT OF
WATER RESOURCES

**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

Ident. Number: 95-18413
Date Received:
Receipt No:
Claim Fee: \$25.00
Received By: _____

**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)

THE TWIST LIVING TRUST
489 SONGBIRD WAY
SPIRIT LAKE ID 83869

Phone: (805) 704-5059

2. Date of Priority: 5/7/2020

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
54N	04W	21	NE SE		BONNER	

5. Description of diverting works:

WELL WITH PUMP 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		

7. Total Quantity Appropriated is:

0.04 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
54N	04W	21	NE		SE		

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If your answer is no, describe in remarks below the authority you have to claim this water right.

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12. Remarks:

Priority Date Explanation:

DATE WELL WAS PUT INTO SERVICE

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 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>The Twist 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 [Signature] Date 2/3/23

Printed Name of Authorized Agent Sandra Twist

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0084540Drilling Permit No. 893876

Water right or injection well # _____

2. OWNER:Name Larry McCallAddress 3199 N. Fort Beale Rd.City Kingman State AZ Zip 86409**3. WELL LOCATION:**Twp. 54 North ☒ or South ☐ Rge. 04 East ☐ or West ☒
Sec. 21 1/4 NE 1/4 SE 1/4Gov't Lot _____ County BonnerLat. 48 ° 00.7365 N (Deg and Decimal minutes)Long. 116 ° 49.8673 W (Deg and Decimal minutes)Address of Well Site 7th parcel from corner of Barn Owl and Songbird City Spirit Lake

(Give at least name of road or 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

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6"	+2	440	.250	Steel	☒	☐	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) Ring Bit @ 440'**9. PERFORATIONS/SCREENS:**Perforations ☒ Y ☐ N Method Down Hole Air PerforatorManufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
410	430	1/4x1	6	6"	Steel	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____**10. FILTER PACK:**

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
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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) 406' Static water level (ft) 340'Water temp. (°F) Cold Bottom hole temp. (°F) ColdDescribe access port Welded Steel Cap**Well test:**

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
NA	50+ gpm	240

Test method:

Pump	Bailer	Air	Flowing artesian
☐	☐	☒	☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dis. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
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8"	20	390	Sand and Gravel		X
8"	390	406	Clay and Gravel		X
8"	406	440	Sand and Gravel	X	

RECEIVED

MAY 14 2020

DWR/NORTH

Completed Depth (Measurable): 440'Date Started: 05/06/2020Date Completed: 05/07/2020**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 Horsley Drilling, Inc. Co. No. 632*Principal Driller C. Mark Horsley Date 05/13/2020*Driller [Signature] Date 05/13/2020*Operator II Justin Durazo Date 05/13/2020

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

Idaho Department of Water Resources Receipt

Receipt ID: C116311

Payment Amount	\$25.00	Date Received	5/22/2023	Region	STATE
Payment Type	Check	Check Number	6344		
Payer	TWIST, KENNETH				

Comments	NOTICE OF CLAIM TO A WATER RIGHT CIVIL CASE NUMBER #49576 FOR:THE TWIST LIVING TRUST WR CLAIM OR PARCEL #95-18413 FOR: CSRBA THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM
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Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$25.00	NORTHERN ID ADJUDICATION FILING FEE	75503	0337	1		1155



Signature Line (Department Representative)