

SEP 26 2022

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN 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: 95-18368

Date Received: 1.23.23

Receipt No: C115144

Claim Fee: 25 By: 101

RECEIVED

JAN 23 2023
DEPARTMENT OF
WATER RESOURCES

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

Please type or print clearly

- Name of claimant(s) Rick and Carol Bauer Phone (602) 705-6783
Mailing address 3511 S. Timothy Lane Coeur d'Alene ID Zip 83814
Street or Box City State
Email address (optional) rcbauer3@gmail.com
- Date of priority: (Only one per claim) 12/3/1975 (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 50N, Range 33, Section 3W,
NE 1/4 of NE 1/4, or Govt. Lot _____ BM, County of _____
Parcel no. RP 04620000046B
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.
Well with pipe to reservoir with pipe to home.
- 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 Month/Day to 12/31 Month/Day amount .02 cfs ☒ or AFY ()
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed .02 cfs ☒ or AFY ()
8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
domestic use for 1 home

9. Location of place of use is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, Govt. Lot _____ 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? Kootenai

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 is the date/year the well was completed.

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: 6

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) Rek Bauer Date: 9-19-2022
Carol Bauer Date: 9-19-2022

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 _____

USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

RECEIVED
JAN 15 1976

1. WELL OWNER Name <u>Michael Bernardo</u> Address _____ Owner's Permit No. <u>95-75-N-21</u>		7. WATER LEVEL Static water level <u>2</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature <u>64.0</u> °F. Quality <u>Good</u> Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																																																																													
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Other <u>Air</u> <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Draw Down</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>4-5</u></td><td><u>1</u></td><td><u>1</u></td></tr></tbody></table>		Discharge G.P.M.	Draw Down	Hours Pumped	<u>4-5</u>	<u>1</u>	<u>1</u>																																																																						
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) _____ ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>3</td><td>Topsoil</td><td></td><td></td></tr><tr><td>8</td><td>3</td><td>10</td><td>Broken Bas</td><td></td><td></td></tr><tr><td>8</td><td>10</td><td>118</td><td>B.N. Clay</td><td></td><td></td></tr><tr><td>8</td><td>118</td><td>120</td><td>H. Bas</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td>CRACK 6" = 120'</td><td></td><td></td></tr><tr><td>6</td><td>120</td><td>148</td><td>H. Bas</td><td></td><td></td></tr><tr><td>6</td><td>148</td><td>149</td><td>BLK Shale</td><td></td><td></td></tr><tr><td>6</td><td>149</td><td>165</td><td>B.N. Shale</td><td></td><td></td></tr><tr><td>6</td><td>165</td><td>175</td><td>GRY Shale</td><td></td><td></td></tr><tr><td>6</td><td>175</td><td>326</td><td>B.N. Shale</td><td></td><td></td></tr><tr><td>6</td><td>326</td><td>340</td><td>H. Bas</td><td></td><td></td></tr></tbody></table> 26' to 168' = 192' 910' = 192' 340' = 2492' 4-5 gpm 1/4" p.c. 240' - 340' 11/16" F. 320' - 340'		Hole Diam.	Depth		Material	Water		From	To	Yes	No	8	0	3	Topsoil			8	3	10	Broken Bas			8	10	118	B.N. Clay			8	118	120	H. Bas						CRACK 6" = 120'			6	120	148	H. Bas			6	148	149	BLK Shale			6	149	165	B.N. Shale			6	165	175	GRY Shale			6	175	326	B.N. Shale			6	326	340	H. Bas		
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5. WELL CONSTRUCTION Diameter of hole <u>6</u> inches Total depth <u>340</u> feet Casing schedule: ☒ Steel ☐ Concrete <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>1/2</u> inches</td><td><u>6</u> inches</td><td><u>1</u> feet</td><td><u>120</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation <u>1/4" holes by</u> _____ inches <u>4" p.c.</u> _____ perforations <u>320</u> feet <u>340</u> feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>20'</u> Material used in seal ☐ Cement grout ☒ Puddling clay ☐ Well cuttings Sealing procedure used ☐ Slurry pit ☒ Temporary surface casing ☒ Overbore to seal depth		Thickness	Diameter	From	To	<u>1/2</u> inches	<u>6</u> inches	<u>1</u> feet	<u>120</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet																																																						
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6. LOCATION OF WELL Sketch map location must agree with written location. <u>(95)</u>  Subdivision Name <u>TRACT 46</u> Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>NE 1/4 SW 1/4 Sec. 33, T. 50 N. R. 2 E</u>		10. Work started <u>12-1-75</u> finished <u>12-3-75</u>																																																																													
		11. DRILLERS CERTIFICATION Firm Name <u>ADAM DRILLING & DEV. INC.</u> Firm No. <u>163</u> Address <u>Box 1002, S.D.P. Idaho</u> Date <u>12-4-75</u> Signed by (Firm Official) <u>Robert Brown</u> and <u>John</u> (Operator)																																																																													

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT

RECEIVED

SEP 23 2022

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 CSRBA

Case No. 49576

Subcase

95-18368
(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.

SCANNED

OCT 03 2022

My name is Rick and/or Carol Bauer

My address is 3511 S. Timothy Lane
Coeur d'Alene Idaho 83814

My phone number is: work _____ Home 602-705-6783

☐ 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:

We purchased the home in September of 2019
so we did not receive a notice to file.

☐ 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.)

Attaching the original well drillers report.

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

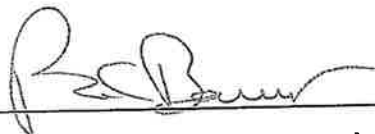
Follow these instructions regarding the hearing on the motion.

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 Jan 18, 2023 at 1:30 Pacific
(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 \$ 25.00.
- ☐ 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 Sept 21, 2022, 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

SEP 23 2022

DEPARTMENT OF
WATER RESOURCES

Form No. 42-1409-2 (Internet 06/21)

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
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CIVIL CASE NUMBER: 69576

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Receipt No: _____

Claim Fee: _____ 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

Please type or print clearly

- Name of claimant(s) Rick and Carol Bauer Phone (202) 705-6783
Mailing address 3511 S. Timothy Lane Coeur d'Alene ID Zip 83814
Street or Box City State
Email address (optional) rcbauer3@gmail.com
- Date of priority: (Only one per claim) 12/31/1975 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
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Well with pipe to reservoir with pipe to home.
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SCANNED

OCT 03 2022

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If the answer is No, describe in Remarks below the authority you have to claim this water right.

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_____ or None ☒

13. Remarks (include an explanation of the priority date selected):
this is the date/year the well was completed.

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Court _____ Decree Date _____ Plaintiff v. Defendant _____
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Agent's title (Please print) Name of organization (Please print)

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Address _____

Name of claimant(s) _____ Claim ID _____

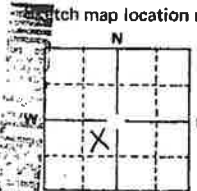
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State of Idaho
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WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

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6	275	326	Bl-N shale																																																																												
6	326	340	H. Bas																																																																												
5. WELL CONSTRUCTION Diameter of hole <u>6</u> inches Total depth <u>340</u> feet Casing schedule: ☒ Steel ☐ Concrete Thickness _____ Diameter _____ From _____ To _____ _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches Number _____ From _____ To _____ H.P.C. 220' - 340' _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>20'</u> Material used in seal ☐ Cement grout ☒ Pudding clay ☐ Well cuttings Sealing procedure used ☐ Sherry pit ☒ Temporary surface casing ☒ Overbore to seal depth																																																																															
6. LOCATION OF WELL Sketch map location must agree with written location. (95)  Subdivision Name <u>TRACT 46</u> Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>NE 1/4 Sec. 33, T. 50 N. R. 2 E</u>		10. Work started <u>12-1-75</u> finished <u>12-3-75</u>																																																																													
11. DRILLERS CERTIFICATION Firm Name <u>ADAM DRILLING & DEV. INC.</u> Firm No. <u>163</u> Address <u>Box 1002, C.P.D., Ida</u> Date <u>12-4-75</u> Signed by (Firm Official) <u>Raymond Brown</u> and _____ (Operator) <u>Same</u>																																																																															

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT

Idaho Department of Water Resources Receipt

Receipt ID: C115144

Payment Amount	\$25.00	Date Received	1/23/2023	Region	STATE
Payment Type	Check	Check Number	7087		
Payer	BAUER, CAROL E				

Comments NOTICE OF CLAIM TO A WATER RIGHT
CIVIL CASE NUMBER #49576
FOR: RICK AND/OR CAROL BAUER
WR CLAIM OR PARCEL # 95-18368
FOR: CSRBA
THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

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)