

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
AUG 18 2023
DEPARTMENT OF
WATER RESOURCES

DISTRICT COURT - CSRBA Fifth Judicial District County of Twin Falls - State of Idaho	
MAY 23 2023	
By	CIVIL CASE NUMBER: 49576
	Clerk Deputy Clerk

Ident. Number: 95-18461
Date Received: 8-18-23
Receipt No: C116915
Claim Fee: \$25.00
Received By: km

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)

ANITA CRONK
10515 W LYNX TRL
COEUR D ALENE ID 83814

Phone: (775) 750-1723

DONALD CRONK
10515 W LYNX TRL
COEUR D ALENE ID 83814

Phone: (775) 750-1723

2. Date of Priority: 8/3/1992

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
50N	05W	35	NE NW		KOOTENAI	

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		

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 KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
50N	05W	35	NE		NW		

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 COMPLETED PER WELL DRILLERS REPORT AND WATER 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 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: 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):

[Signature]
Debra Brown

Date:

5/15/2023

Date:

5/15/2023

Form 238-7
9/82

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

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.

1. WELL OWNER Name <u>NORMAN FLOM</u> Address <u>N. 10835 COUGAR GULCH RD</u> Owner's Permit No. <u>95-92-N-147</u>	7. WATER LEVEL Static water level <u>35</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature <u>60°</u> Quality <u>GOOD</u> Describe artesian or temperature zones below.																																														
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Baller ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>24 ESTIMATED</u></td> <td><u>175</u></td> <td><u>1</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>24 ESTIMATED</u>	<u>175</u>	<u>1</u>																																								
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <u>081856</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore 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><u>8</u></td> <td><u>0</u></td> <td><u>4</u></td> <td>SOIL</td> <td></td> <td>☒</td> </tr> <tr> <td></td> <td><u>4</u></td> <td><u>30</u></td> <td>CLAY - BROWN</td> <td></td> <td>☒</td> </tr> <tr> <td></td> <td><u>30</u></td> <td><u>60</u></td> <td>CLAY - TAN</td> <td></td> <td>☒</td> </tr> <tr> <td><u>6</u></td> <td><u>60</u></td> <td><u>115</u></td> <td>DECOMPOSED GRANITE</td> <td></td> <td>☒</td> </tr> <tr> <td></td> <td><u>115</u></td> <td><u>165</u></td> <td>GRANITE</td> <td></td> <td>☒</td> </tr> <tr> <td></td> <td><u>165</u></td> <td><u>175</u></td> <td>BROKEN QUARTZ</td> <td></td> <td>☒</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>8</u>	<u>0</u>	<u>4</u>	SOIL		☒		<u>4</u>	<u>30</u>	CLAY - BROWN		☒		<u>30</u>	<u>60</u>	CLAY - TAN		☒	<u>6</u>	<u>60</u>	<u>115</u>	DECOMPOSED GRANITE		☒		<u>115</u>	<u>165</u>	GRANITE		☒		<u>165</u>	<u>175</u>	BROKEN QUARTZ		☒
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u> inches</td> <td><u>6</u> inches + <u>2</u> inches</td> <td>feet</td> <td><u>124</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> </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 _____ inches by _____ inches <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> 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>60</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port <u>N/A</u>	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches + <u>2</u> inches	feet	<u>124</u> feet	_____ inches	_____ inches	feet	_____ feet	_____ inches	_____ inches	feet	_____ feet	_____ inches	_____ inches	feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet														
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6. LOCATION OF WELL Sketch map location must agree with written location. N <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">W</td> <td style="width: 25%; text-align: center;"> 35 </td> <td style="width: 25%; text-align: center;">E</td> <td style="width: 25%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">S</td> <td></td> <td></td> </tr> </table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> NW ¼ NW ¼ Sec. <u>35</u>, T. <u>50N</u> N/S, R. <u>5W</u> E/W.	W	35	E			S			10. Work started <u>8-3-92</u> finished <u>8-3-92</u> 11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>UNITED DRILLING INC.</u> No. <u>414</u> Address <u>P.O. BOX 2499</u> Date <u>8-3-92</u> <u>CDA, ID 83814</u> Signed by (Firm Official) <u>[Signature]</u> and <u>[Signature]</u> (Operator) <u>Larry Vanderlinde</u>																																						
W	35	E																																													
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USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

95-18461 NOTICE OF CLAIM



2019 AERIAL IMAGERY

MAY 22 2003

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

Subcase

95-18461

(Insert water right number)

STANDARD FORM 4

Case No. 49576

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

MAY 22 2023

Page 1

My name is Donald Croak

My address is 10515 W. Lynx Trail
Coeur d'Alene ID 83814

My phone number is: work 775 750 1723 Home 775 750 1723

☐ 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:

Recently purchased property and
previous owner hadn't filed a
claim

☐ 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.

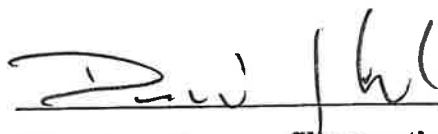
Follow these instructions regarding the hearing on the motion.

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 August 15, 2023 13:30 part
(insert date and time) (1:30) 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 5/17, 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