

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

Claim ID: 95-17741

Date Received: 12-5-18

Receipt No: 0033938

Claim Fee: 2500 By: ja

RECEIVED

DEC 05 2018

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

IDWR/NORTH

Please type or print clearly

1. Name of claimant(s) JAMES AND/OR LOIS WORST Phone (208) 755-8223

Mailing address 625 E BEST AVE COEUR D ALENE ID Zip 83814
Street or Box City State

Email address (optional) JIM.WORST@RCWORST.COM

2. Date of priority: (Only one per claim) 10/1/2018 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (x) or Other () (a)
which is tributary to (b)

4. Location of point of diversion is: Township 50N, Range 04W, Section 16
SE 1/4 of NW 1/4, or Govt. Lot BM, County of KOOTENAI
Parcel no. 50N04W164675

Additional points of diversion, if any:

If available, GPS coordinates:

5. 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 IS 860 FEET DEEP, PIPED TO A RESERVOIR WITH A PUMP THEN PUMPED TO HOME

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For DOMESTIC purposes from 01/01 to 12/31 amount 0.04 cfs (x) or AFY ()
Month/Day Month/Day

For purposes from to amount

7. Total quantity claimed 0.04 cfs (x) or AFY ()

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
DOMESTIC USE FOR ONE HOME

9. Location of place of use is: Township 50N, Range 04W, Section 16,
SE 1/4 of NW 1/4, Govt. Lot _____ BM, Parcel no. SAME

for (check one) **Domestic** (✓) **Stock** () **Domestic and Stock** ()
If different than shown in Item 4
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.


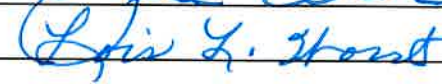
12. Describe any other water rights used at the same place and for the same purposes as described above.
95-7390 AND 95-9100 or None ()

13. Remarks (include an explanation of the priority date selected):
WELL MAINTENANCE 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 Coeur d'Alene-Spokane 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: 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: 12/5/2018
 Date: 12/5/2018

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) JAMES AND/OR LOIS WORST Claim ID _____

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0079058

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

2. OWNER:
Name Jim Worst
Address 625 E. Best Ave.
City Coeur d'Alene State ID Zip 83814

3. WELL LOCATION:
Twp. 50 North or South Rge. 4 East or West
Sec. 16 1/4 SE 1/4 NW 1/4

Gov't Lot _____ County Kootenai
Lat. 47 0 40.854 (Deg. and Decimal minutes)
Long. 116 0 50.592 (Deg. and Decimal minutes)
Address of Well Site 1652 S. Four Winds Rd.
City Coeur d'Alene

(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 Deepen

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
NA				

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
NA					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was drive shoe used? Y N Shoe Depth(s) _____

9. PERFORATIONS/SCREENS:
Perforations Y N Method _____
Manufactured screen Y N Type _____
Method of installation NA

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

Length of Headpipe NA Length of Tailpipe NA

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) 240 Static water level (ft) 240
Water temp. (°F) Cold Bottom hole temp. (°F) Cold
Describe access port Steel Welded Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Baller	Air	Flowing artesian
NA	8 gpm	240	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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
5.5	0	355	Old Well 1/2 gpm	X	
5.5	355	378	Granite		X
5.5	378	379	Fractured Granite 1/2 gpm	X	
5.5	379	655	Granite		X
5.5	655	659	Fractured Granite 5 gpm	X	
5.5	659	819	Granite		X
5.5	819	831	Fractured Granite 2 gpm	X	
5.5	831	860	Granite		X
Completed Depth (Measurable): <u>860'</u>					
Date Started: <u>9/14/2018</u>		Date Completed: <u>9/16/2018</u>			

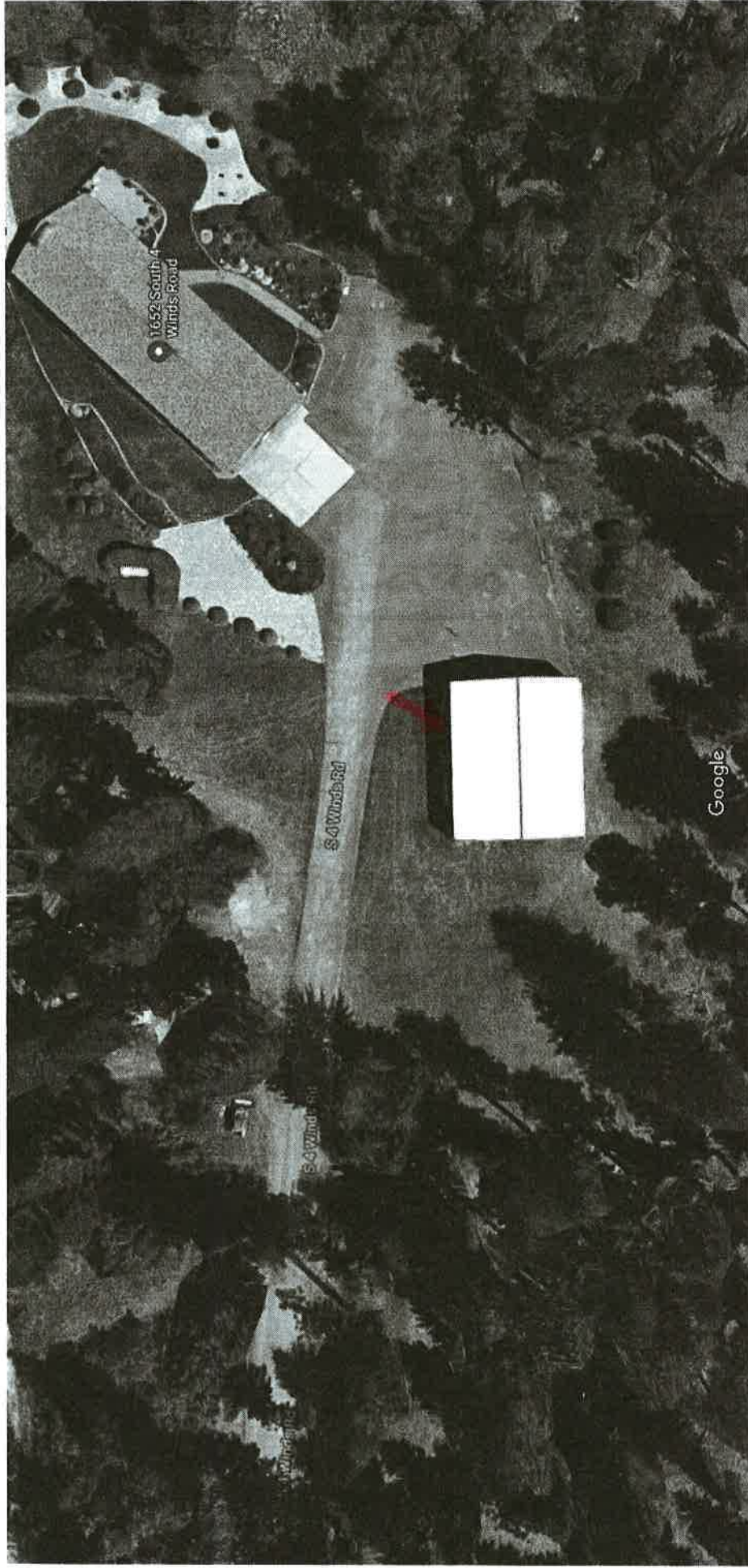
14. DRILLER'S CERTIFICATION:
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Horsley Drilling, Inc. Co. No. 632
*Principal Driller C. Mark Horsley Date 10/1/2018
*Driller Steve C. Horsley Date 10/1/2018
*Operator II _____ Date _____
Operator I Robert B. Miller Date 10/1/2018

* Signature of Principal Driller and rig operator are required.

Location: N 47° 40.856'
W 116° 50.595'
Elevation 2803'

Google Maps 1652 s four wind rd cda idaho 83814



Imagery ©2018 Google, Map data ©2018 Google 20 ft

"1652 s four" "cda idaho 83814"
1652 S 4 Winds Rd
 Coeur d'Alene, ID 83814

Don't see what you're looking for?
 Search the web instead

Should this place be on Google Maps?
 Add a missing place

AIN: 137644 11.5386 acres
 Parcel: 50N04W164675

1478 S. Fourwinds Rd
 AIN: 114536 5.1001 Acres
 Parcel: 50N04W164600

D7 Bare Forest
 AIN: 319599 6.1090 Acres
 Parcel: 80N04W164650