Form No. 42-1409-2 (Internet 5/17)

DISTRICT COURT - CSRBA
Fifth Judicial District
County of Twin Falls - State of Idaho

APR 15 2019

## 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

d	WIL CASE	NUMB	ER: 49	Deputy Q	M
ČI	laim ID:	75-17	789		_
D	ate Receive	d:			_
R	eceipt No: _				_
CI	laim Fee: 2	S. 10	By:	·	

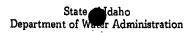
## NOTICE OF CLAIM TO A WATER RIGHT

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						
1.	Name of claimant(s) THE EPISCOPAL DIOCESE OF SPOKAN	NE, INCPhone (509) 624 - 319	<u>i [</u>			
	Mailing address 245 E 13TH AVE SPOK	KANE WA Zip 99202				
	Mailing address 245 E 13TH AVE SPOKE  Street or Box  Email address (optional) C ~ ~ ~ C C S C S C S C S C S C S C S C	Kanediokese, orz gri				
2.	( /12/1671	(Explain priority date selected in Remarks)				
3.	3. Source of water supply (Check one) Ground Water (X) or Other	er ( ) (a)	_			
	which is tributary to (b)					
4.	4. Location of point of diversion is: Township <u>49N</u> , Ran	nge 04W , Section 26	_;			
	SE1/4 ofSW1/4, or Govt. Lot5BM,	, County of KOOTENAI	<sup>1</sup>			
	Parcel no. 49N04W266975					
	Additional points of diversion, if any:					
	If available, GPS coordinates:					
5.	Description of diverting works (wells, pumps, spring boxes, pipe or enlargements in use, the dimensions of the diversion works a each well.  1- well 4-6 6Pm gm²	as constructed and as enlarged and the depth of	of			
6.	6. Water is claimed for the following: (limited to domestic and/or st	nth/Day Month/Day cfs (✓) or AFY				
	For purposes from	to amount				
	<ol> <li>7. Total quantity claimed cfs (✓) or AFY ( )</li> <li>8. Non-irrigation uses. Describe fully. (Domestic: give number of the context of the context</li></ol>					
/	Sunner Church camp - Kitcher	n; buth/shower houses				

9.	Location of place of use is: Township49N, Range04W, Section26,
	SE 1/4 of SW 1/4, Govt. Lot 5 BM, Parcel no. 49N04W266975 & 49N04W352500
	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 3-12
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):  DATE well completed and Put to use.  Gud
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
	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:
	Signature of Claimant (s) Date:
	Date:
16.	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 DAULOS, HUSARD JA - CAMPLOS of FRISCOPL D'OCCOR A SOCKUME - CAMP, CROSS Agent's title (Please print)  And that the statements contained in the foregoing document are true and correct.  Signature of Authorized Agent Agent Relberg Date April 5, 2019  Printed Name of Authorized Agent Relberg Date April 5, 2019  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
Ma	me of claimant(s) THE EPISCOPAL DIOCESE OF SPOKANE, INC





## **WELL DRILLER'S REPORT**

State law requires that this report be filed with the Director, Department of Water Administration within 30

_	days after the completion of	raband	onmen	t of the	well.			٠.		
ľ	I. WELL OWNER		VATER	LEVE	(ENT'0)		<del></del>	<del></del>		
ı	Name EDISCOPAL PROCESS OF SPOKANE, Lake.									
l	Name <u>Ediscopal Molese of Spokawe, lako,</u> CAMP CLOSS Address 245 E. 13TH SPOKAWE, W.N. 99202			Flowing?  Yes  No G.P.M. flow						
	•	Temperature° F. Quality								
L	Owner's Permit No. 95-73-N-24		ontroll	ed by		☐ Plug				
1	2. NATURE OF WORK  New well  Deepened  Replacement		8. WELL TEST DATA  [] Pump							
	☐ Abandoned (describe method of abandoning)	Discharge G.P.M.		G.P.M.	Draw Down Hou		rs Pumped			
١,	PROPOSED USE	<u> </u>	·····			<del> </del>				
٦										
	Domestic   Irrigation   Test		· · · · · ·	OGIC I	LOG	-				
	☐ Municipal ☐ Industrial ☐ Stock	Hole Diam.	From	pth To	Materia!		Yes	No		
4	. METHOD DRILLED	8	0	#5		2	工			
		6	45	350	GRANITE GRANITE		X	X		
L	☐ Cable				Z 11/14 17 FS					
5	. WELL CONSTRUCTION					<del></del>	+	├-		
	Diameter of hole Tinches Total depth 352 feet	<u> </u>					1	F		
	Casing schedule:	<u> </u>					+	├-		
	Thickness Diemeter From To 125 12 inches  inches + feet 60 feet	<u> </u>								
	inches feet feet									
	inches inches 52 feet 352 feet inches feet feet						$\Box$			
	inches feet feet					<u>-</u>	┽╾┥	-		
	Was a packer or seal used? ☐ Yes 🛱 No									
	Perforated?					<u> </u>	++	-		
	Size of perforation inches by inches Number									
	Number From To 320 perforations 292 feet 362 feet									
	perforations feet feet						+			
	perforations feet feet									
	Well screen installed? ☐ Yes Ø No							_		
	Manufacturer's name Model No,									
	Diameter Slot size Set from feet to feet Diameter Slot size Set from feet to feet						┾╌┤			
	ŀ				1.1.					
	Gravel packed? ☐ Yes Æ No Size of gravel						1-1	$\dashv$		
	· •						$\square$			
	Surface seal?  Yes									
_	LOCATION OF WELL		-+					$\dashv$		
υ.	Sketch map location must agree with written location.			······································		<del>,</del>	<u></u>	ᅦ		
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	10. Work started 6/11/75 finished 6/12/				~				
	4					<del></del>	긕			
	w i	11. DRILLER'S CERTIFICATION  This well was drilled under my supervision and this report is true to the best of my knowledge.					ı			
	ļii.									
						,				
		ASSOCIATED WELLERS, NE			Ne 200	3	-			
	County KOOTENAI	ASSOCIATED WELL DEVELORS INC JOHN Number DEVELOR 123 CHARD ALENS, LAHE					.			
	NW 1/W 1/8 Sec. 35, T. 49 N/6, R. 4 M/W	4 am David Wands LR.					23			
		Miz.	10 D.	7-			-¥	- 1		