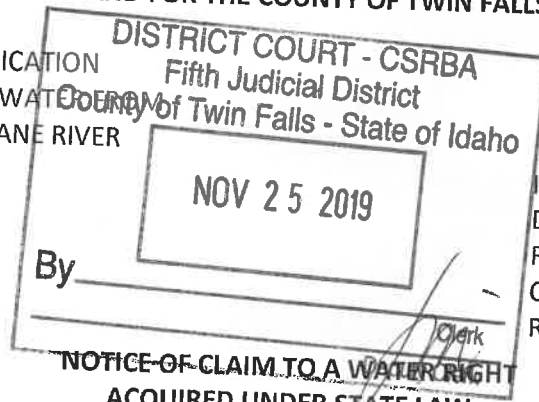


IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER OF
THE COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM



CIVIL CASE NUMBER: 49576

Ident. Number: 95-17909
Date Received:
Receipt No:
Claim Fee:
Received By: _____

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)

SUSAN D CUTLER
PO BOX 744
ATHOL ID 83801

Phone: (208) 420-8876

2. Date of Priority: 4/22/2002

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
53N	03W	3	NW NE	2	KOOTENAI	

5. Description of diverting works:

WELL, PUMP AND PIPELINE TO HOME AND HYDRANTS

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:

ONE HOME WITH LAWN

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
53N	03W	3	NW		NE	2	

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: none

12. Remarks:

Priority Date Explanation:
Well Report

13. Basis of Claim: Beneficial Use

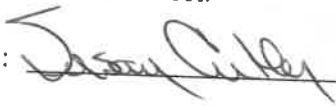
14. Signature(s)

(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 ☒ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 3

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: _____

Date: _____

SESW

34

SWSE

54N03W

SESE

NEW 3

NWNE 2

NESE

POU

WELL

3

53N03W

SESW

SWNE

SENE

NESW

NWSE

NESE

Identify

Identify from:

Parcels

Parcels

CUTLER, SUSAN D

Parcel_Improvement_Information

026400010150

026400010150

026400010150

026400010150

026400010150

026400010150

Location:

Field	Value
COUNTY	Kootenai
IMP_TYPE	MHHOOKUP
OBJECTID	1710586
PIN	026400010150
YEAR_BUILT	2003

RECEIVED

Form 238-7
11/97 APR 23 2002

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

1. WELL TAG NO. D-0022115
DRILLING PERMIT NO. 776398
Other IDWR No.

2. OWNER: MICHAEL A. MADSEN
Name
Address 30701 PHEASANT RUN CRT.
City ATHOL State ID Zip 83801

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
W E S
Twp. 53N North ☐ or South ☐
Rge. 3W East ☐ or West ☐
Sec. 3 1/4 SW 1/4 SW 1/4
Gov't Lot 10 acres 40 acres 160 acres
County KOOTENAI
Lat. : : Long. : :
Address of Well Site FOREST VIEW CRT.
City ATHOL

(Give at least name of road + Distance to Road or Landmark)

Lt. 15 Blk. 1 Sub. Name

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT		METHOD
Material	From	To	Sacks or Pounds		
BENTONITE	0	20	12 SACKS		POUR (DRY)

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

Was drive shoe seal tested? ☐ Y ☒ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	11.5'	424	.75	STEEL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe Length of Tailpipe

9. PERFORATIONS/SCREENS

Perforations Method STAR (AIR)

Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
390	420	1/4	600			<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

340 ft. below ground Artesian pressure lb.
Depth flow encountered 340 ft. Describe access port or control devices:

53N 3W 3

POSTED

1. WELL TESTS:

☐ Pump ☐ Bailor

Yield gal./min.	Drawdown	Pumping Level	Time
20	426	420	1 HR.

Water Temp. COLD

Bottom hole temp.

Water Quality test or comments:

Depth first Water Encounter 387

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
10	0	1	TOP SOIL	
10	1	20	COURSE SAND/GRAVEL w/ COBBLES	X
6	20	34	COURSE SAND/GRAVEL w/ COBBLES	X
6	34	64	COURSE SAND/GRAVEL	X
6	64	68	BOULDER	X
6	68	55	COURSE SAND/GRAVEL	X
6	155	179	COURSE GRAVEL/COBBLES	X
6	179	218	COURSE GRAVEL/SOME SAND	X
6	218	220	BOULDER	X
6	220	387	COURSE SAND/GRAVEL w/ WATER	X
6	387	391	BOULDERS	X
6	391	415	COURSE SAND/GRAVEL w/ WATER	X
6	415	426	GRANITE/BLACK/WHITE MTD	X

Completed Depth 426' (Measurable)
Date: Started 4-18-02 Completed 4-22-02

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name FOGLE Pump Firm No. 537
Firm Official J. Allred Date 4/22/02
and J. Allred
Driller or Operator J. Allred Date 4/22/02
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES