

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

FEB 07 2022

By _____

CIVIL CASE NUMBER: 49576 Clerk
Deputy Clerk

**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

Ident. Number: 95-18254
Date Received: 1/31/2022
Receipt No:
Claim Fee: \$2500
Received 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)
BOYD TRUST
5897 N 18TH ST
DALTON GADENS ID 83815
Phone: (951) 205-1768

2. Date of Priority: 10/10/2013

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
51N	03W	31	SW NE		KOOTENAI	

5. Description of diverting works:
WELL WITH PIPELINE TO HOME

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 1 HOME

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
51N	03W	31	SW		NE		

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 AND WATER 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 Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

<u>TRUSTEE</u>	of	<u>BOYD TRUST</u>
Agents 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 Edward K. Boyd Date 1-31-22

Printed Name of Authorized Agent EDWARD K. BOYD

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D D0061701

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER: Dale Rainey

Name _____

Address 296 W. Sunset Ave. #2

City Coeur d'Alene State ID Zip 83815

3. WELL LOCATION:

Twp. 51 North ☒ or South ☐ Rge. 3 East ☐ or West ☒

Sec. 31 1/4 SW 1/4 NE 1/4

Gov't Lot _____ County Kootenai

Lat. 47 ° 43 : 553 (Deg. and Decimal minutes)

Long. 116 ° 45 : 169 (Deg. and Decimal minutes)

Address of Well Site 5897 N. 18th St.

City Dalton Gardens

(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 _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method/procedure
Bentonite	0	19	650lbs	Dry Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6"	+2	267	.250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 267'

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☐ N Method _____

Manufactured screen ☒ Y ☐ N Type Stainless

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
268	273	35	1	6"	Stainless	

Length of Headpipe 5' Length of Tailpipe 2'

Packer ☒ Y ☐ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method
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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) 205' Static water level (ft) 200'

Water temp. (°F) Cold Bottom hole temp. (°F) Cold

Describe access port Welded Steel Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
	25	1 hr.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Test method:

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
10	0	1	Top Soil		X
10	1	19	Sand & Gravel		X
8	19	114	Sand & Gravel		X
8	114	115	Boulder		X
8	115	205	Sand & Gravel		X
8	205	235	Coarse Sand & Gravel	X	
8	235	275	Sand & Gravel	X	

RECEIVED

NOV 13 2013

IDWR / NORTH

Completed Depth (Measurable): 275'

Date Started: Oct 4, 2013

Date Completed: Oct 10, 2013

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 H2O Well Service Inc. Co. No. 448

*Principal Driller [Signature] Date 10-14-13

*Driller [Signature] Date 10-14-13

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

Identify from: Tax Parcels

[-] Tax Parcels

BOYD TRUST

Location: 2,293,599.848 1,839,717.863 Meters

Field	Value
ID	12901923
UPDATED	2/5/2021
PIN	D140031012AA
OWNER	BOYD TRUST
ADDRESS1	5897 N 18TH ST
ADDRESS2	<null>
CITY	DALTON GARDENS
STATE	ID
ZIPCODE	83815
P_ADDRESS	5897 N 18TH ST
P_ZIPCODE	<null>
SUB_NAME	DALTON GARDENS HL IRR
LEGAL1	DALTON GARDENS ADD HL IRR LANDS, N2-TR 12 EX W2 EX R
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	1.1
COUNTY	Kootenai
SOURCE	<null>
YEAR_BUILT	2013

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Identified 1 feature