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APR 14 2017
DWR / NORTH

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

Ident. Number: 95-17299
Date Received: 4/14/2017
Receipt No: N032500
Claim Fee: 25.00
Received By: A.W.

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)

BANE FAMILY TRUST
7083 W STRIBS POND RD
COEUR D ALENE ID 83814

Phone: 208 661-6753

2. Date of Priority: 5/26/2015

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
49N	04W	5	NW NE	2	KOOTENAI	

5. Description of diverting works:

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		
STOCKWATER	01/01	12/31	0.02		

7. Total Quantity Appropriated is:

0.06 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
49N	04W	5	NW		NE	2	

STOCKWATER within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
49N	04W	5	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:

12. Remarks and Priority Date Explanation:

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

 of Brian Family Trust
Title Organization

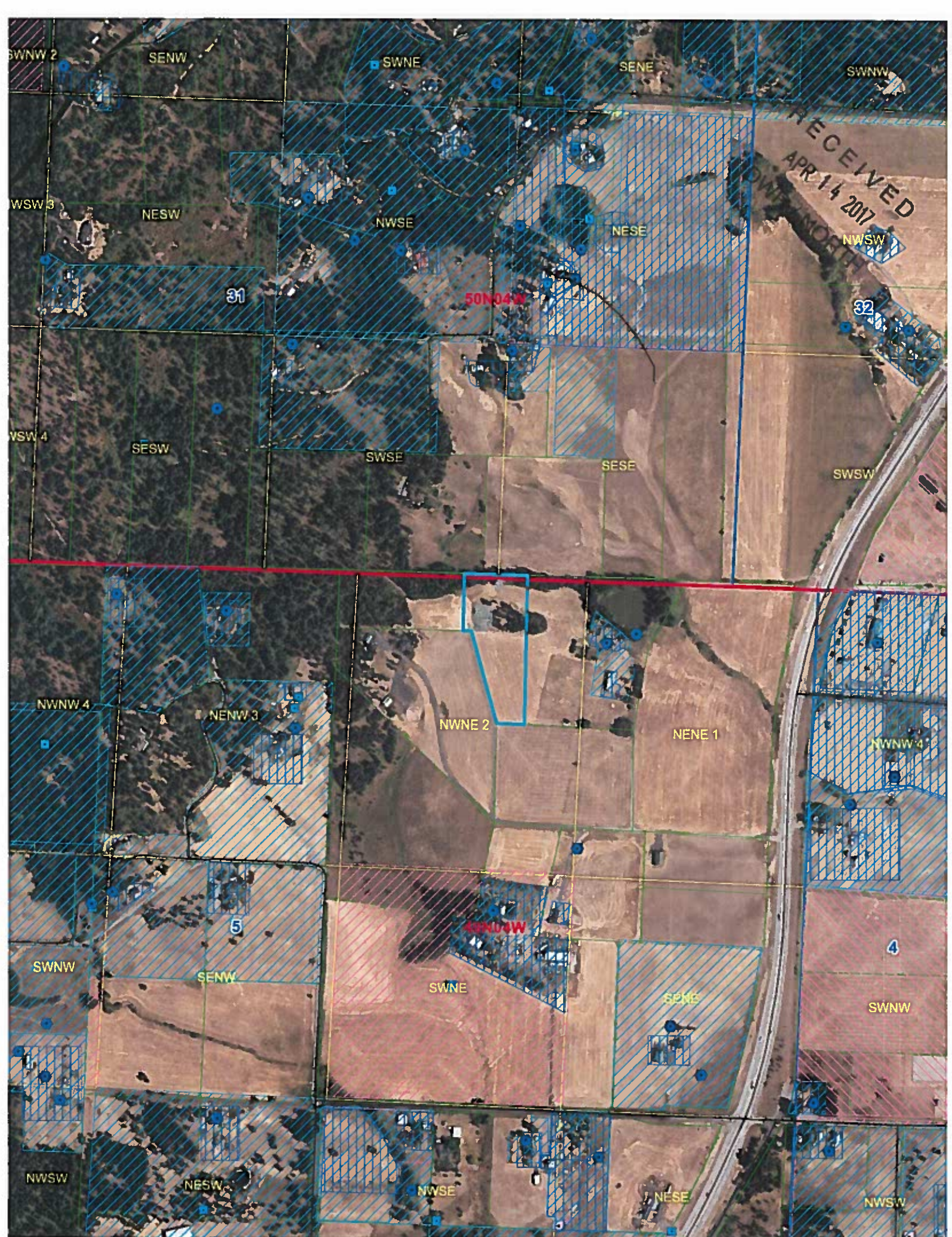
that I have signed the foregoing document in the space below as

 of BANE FAMILY TRUST
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent  Date 4/14/17

Title and Organization BANE FAMILY TRUST, TRUSTEE



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTRECEIVED
APR 14 2017

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1. WELL TAG NO. D D0069370
Drilling Permit No. 875355

Water right or injection well # _____

2. OWNER: Zach & Katie Bane

Name _____

Address 1315 S. Kicking Horse LaneCity Coeur d'Alene State ID Zip 83814

3. WELL LOCATION:

Twp. 49 North ☒ or South ☐ Rge. 04 East ☐ or West ☒Sec. 05 1/4 NW 1/4 NE 1/4Gov't Lot _____ County KootenaiLat. 47 37.752 (Deg. and Decimal minutes)Long. 116 52.698 (Deg. and Decimal minutes)Address of Well Site Strips Pond Rd.City Coeur d'Alene

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	38	1200 lbs	Overbore

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
6"	+2	154	.250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4"	-10	220	.200	PVC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 154'

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method SkillsawManufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
200	220	1/4x8	48	4"	PVC	.200

Length of Headpipe _____ Length of Tailpipe _____

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) 160 Static water level (ft) 100Water temp. (°F) Cold Bottom hole temp. (°F) ColdDescribe access port Welded steel cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	25	1 hr.

Test method:

Pump	Boiler	Air	Flowing artesian
<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
10	0	3	Top Soil		X
10	3	38	Tan Clay		X
8	38	150	Tan Clay		X
8	150	154	Tan & White Granite	X	
8	154	170	Gray & White Granite		X
6	170	180	Black & White Granite		X
6	180	205	Green Granite	X	
6	205	220	Gray & White Granite		X

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JUL 24 2015

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Completed Depth (Measurable): 220'Date Started: May 22, 2015Date Completed: May 26, 2015

14. DRILLER'S CERTIFICATION:

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. 448Principal Driller Tom RuppelDate 5-28-15Driller Jim McGeheeDate 5-28-15

Operator II _____

Date _____

Operator I _____

Date _____

* Signature of Principal Driller and rig operator are required