

JUL 06 2026

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

By \_\_\_\_\_

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  
Clerk  
Deputy Clerk

Ident. Number: 95-18781  
Date Received:  
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)

JACK & REBECCA ESTEPP FAMILY TRUST  
341 MESA DR  
ATHOL ID 83801

Phone: (619) 572-2756

2. Date of Priority: 12/31/2022

3. Source:  
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
54N	03W	24	NE NE		BONNER	

5. Description of diverting works:

DRILLED 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	0.02	

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
54N	03W	13	SE		SE		
54N	03W	24	NE		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:

YEAR HOME WAS 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

Trustee of Jack and Rebecca Estep Family Trust  
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 Jack Estep Date 30 Jun 26

Printed Name of Authorized Agent Jack Estep

Identify

Identify from: **Parcels**

- Parcels
  - ESTEPP, JACK & REBECCA FAMILY TRUST

Location: 2,303,454.757 1,872,130.628 Meters

Field	Value
ID	18942047
UPDATED	1/29/2026
PIN	RP013640000010A
OWNER	ESTEPP, JACK & REBECCA FAMILY TRUST
ADDRESS1	341 MESA DR
ADDRESS2	
CITY	ATHOL
STATE	ID
ZIPCODE	83801
P_ADDRESS	341 MESA DR
P_ZIPCODE	83801
SUB_NAME	JIM CANYON RANCH PUD
LEGAL1	24-54N-3W JIM CANYON RANCH PUD LOT 1
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	2.8
COUNTY	Bonner
SOURCE	<null>
YEAR_BUILT	2022

Identified 1 feature

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IDAHO DEPARTMENT OF WATER RESOURCES  
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0086503

Drilling Permit No. 900715  
Water right or injection well # \_\_\_\_\_

2. OWNER

Name Northwest Custom Homes Inc.  
Address 2590 West Sorbonne Drive  
City Coeur d'Alene State Id Zip 83815

3. WELL LOCATION:

Twp. 54 North  or South  Rge. 03 East  or West   
Sec. 24 1/4 NE 1/4 NE 1/4  
Gov't Lot \_\_\_\_\_ County Bonner  
Lat. 48° 01.202 (Deg. and Decimal minutes)  
Long. 116° 38.186 (Deg. and Decimal minutes)  
Address of Well Site 314 Mesa Drive  
City Careywood

Lot. 1 Blk. \_\_\_\_\_ Sub. Name Jim Canyon Ranch

4. USE:

Domestic  Municipal  Monitor  Irrigation  Thermal  Injection  
 Other \_\_\_\_\_

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

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 ft³)	Placement method/procedure
Bentonite granular	0	40	1400lbs	Dry pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6	2	40	.250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4	20	500	200	PVC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was drive shoe used?  Y  N Shoe Depth(s) 40

9. PERFORATIONS/SCREENS:

Perforations  Y  N Method Drill  
Manufactured screen  Y  N Type \_\_\_\_\_  
Method of installation \_\_\_\_\_

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
460	500	3/8rnd	120	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 ft³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian?  Y  N Artesian Pressure (PSIG) \_\_\_\_\_  
Describe control device Steel Cap Welded

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 21 Static water level (ft) 80  
Water temp. (°F) \_\_\_\_\_ Bottom hole temp. (°F) \_\_\_\_\_  
Describe access port 1 1/4 Plug

Well test:			Test method:			
Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
N/A	51/2	60	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Water Quality test or comments: Clear, cold, no smell

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
12	0	3	Top Soil Brown		X
12	3	8	Granite cobbles		X
12	8	25	Granite brown, white, black highly Fractured		X
12	25	40	Granite brown, white, black med		X
6	40	120	Granite, white, black, peach med-soft		X
6	120	500	Granite, white, black, peach med	X	
			1 GPM @ 145		
			2 GPM @ 230		
			2.5 GPM @ 467		

RECEIVED

NOV 11 2020

IDWR/NORTH



Completed Depth (Measurable) 500

Date: Started 11/04/2020 Completed 11/10/2020

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 United Crown Pump and Drilling Co. No. 636

\*Principal Driller Jason C Beckham Date 11/10/2020

\*Driller [Signature] Date 11/10/2020

\*Operator II GABRIEL VANANJOET Date 11/10/2020

Operator I \_\_\_\_\_ Date \_\_\_\_\_

\* Signature of Principal Driller and rig operator are required.