

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 95-10156Date Received: 2/20/09Receipt No: NO 19972Received By: cm

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) Wendall R. & Cindy Cooper Phone (208) 664-8637Mailing Address 2178 Wolf Lodge Cr. RD Coeur d'Alene ID Zip 83814
Street or Box City State2. Date of Priority: (Only one per claim) 7/1/1968
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township 50N, Range 2W, Section 21,
NW 1/4 of SW 1/4, or Govt. Lot _____, BM. County of Kootenai;Parcel (PIN) no. 50N02W215425

Additional points of diversion if any: _____

If available, GPS coordinates: _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, Etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For 04 cfs Domestic purposes from 1/1 to 12/31 amount 04 cfs
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 04 cfs () or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 home and a Hatched apartment

9. Location of Place of Use is: Township 30N, Range 02W, Section 21,
NW 1/4 of SW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
for (Check One) Domestic (X) Stock () Domestic and Stock ()
If different than shown in Item 4

Additional places of use, if any _____

10. In which county (ies) are lands listed above as place of use located? Kootenai

11. Do you own the property listed above as place of use? Yes (X) 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 (X)

13. Remarks:

14. Basis of Claim (Check One) Beneficial Use (X) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices 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: 1

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) Wendall N. Cooper Date: _____
_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

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

_____ of _____,
Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of 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 _____

Last Name _____ Identification No. _____

KOOTENAI COUNTY TAX STATEMENT

Tom Malzahn
Kootenai County Treasurer
208-446-1005

Tax Year: 2008
AIN: 133591
PIN: 50N02W215425
Code-Area: 021000

Bill Number: 146155
Billing Date: 10/25/2008
Balance good until: 12/22/2008
Last Payment:

Legal Desc: TX #6043 EX E 15.5', TX #15951 EX E 15.5' [IN NW-SW]

WENDALL R COOPER
PO BOX 3326
COEUR D ALENE ID 83816-2509

18432 60 60
1/1

Location: 2178 S WOLF LODGE CREEK RD



IMPORTANT
PLEASE READ BOTH BACK AND FRONT
PAYMENTS RECEIVED WITH A DELINQUENCY WILL BE APPLIED TO THE OLDEST DELINQUENT TAX YEAR. TO AVOID LATE CHARGES, PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE.

Values	Acres	Amount	Values Continued	Acres	Amount	Exemptions and Credit	Amount
IMPROVEMENT VALUE		160,670				HOMEOWNERS EX	-100,938
LAND VALUE		91,000					
						Total Taxable	150,732

Taxing District	Phone	Rate	Total	Spec Assessments	Phone	Rate	Total
1-KOOTENAI CO	208-446-1000	0.0022080930	\$332.82	452-S/A-MICA FP			33.74
228-EASTSIDE HWY	208-765-4714	0.0005635470	\$84.95	457-SW-S/A			91.00
230-SD#271-BOND	208-664-8241	0.0001916900	\$28.88	482-S/A-MICA FPA			2.50
230-SD#271-OTHER	208-664-8241	0.0000210190	\$3.18				
230-SD#271-SUPP	208-664-8241	0.0009535990	\$143.74				
271-KCF LIBRARY	208-772-5612	0.0001739840	\$26.22				
351-N ID COLLEGE	208-769-3340	0.0007274670	\$109.66				
354-KOOT EMS	208-676-8739	0.0001097130	\$16.54				
				Urban Renewal	Phone	Rate	Total
Bill Summary	\$873.23	\$0	\$0.00	\$0.00	\$0.00	\$0.00	\$873.23

If you have a mortgage company responsible for making your property tax payments, please confirm with the mortgage company prior to sending a payment to the Kootenai County Treasurer's Office.
Other Payment Options: By Credit Card call (800) 601-1078 or web www.kcgov.us. Transaction subject to vendor fee.

Keep This Portion

**2nd
Half**

Your cancelled check is your receipt.

Make Check Payable to: KOOTENAI COUNTY TREASURER
WENDALL R COOPER

Bill Number: 2008 - 146155
AIN: 133591
PIN: 50N02W215425

If minimum amount due
was paid for 1st half,
2nd half amount due is:
\$436.61

Monthly Payments are Accepted
DELINQUENT IF NOT PAID BY **June 22, 2009**

066228000000436615

RETURN THIS STUB WITH 2ND HALF PAYMENT
Note name and address changes below

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____

PO Box 6700
Coeur d'Alene, ID 83816-6700

