

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 95-730
Date Received: 5/13/2009
Receipt No: NO20567
Received By: *W*

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

DEBORAH CONWAY Phone: (208)687-2970
6766 W TWIN ECHO RD
RATHDRUM ID USA 83858

OR

EDWIN SZCZEPANIAK Phone: (208)687-2970
6766 W TWIN ECHO RD
RATHDRUM ID USA 83858

OR

LOREEN R ELLERSICK Phone: (208)687-1203
6757 W TWIN ECHO RD
RATHDRUM ID USA 83858

OR

LAURI HITE Phone:
3410 E CARMELLA CT
SPOKANE WA USA 99223

2. Date of Priority: 05/01/1924

3. Source: TWIN LAKES , TWIN LAKES , TWIN LAKES Trib. to: RATHDRUM CREEK ,
RATHDRUM CREEK , RATHDRUM CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 Lot	County	Type
52N	04W	6	SE	NE		KOOTENAI	
52N	04W	6	SE	NE		KOOTENAI	
52N	04W	6	NE	NE		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	03/15	11/15	0.02	1.8

7. Total Quantity Appropriated is:
0.02 C.F.S. and/or 1.8 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 3

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
52N	04W	6	NE	NE	DOMESTIC	
			SE	NE	DOMESTIC	

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

PLACE OF USE ALSO KNOWN AS LOTS 1-3, BLK. 5, LOTS 9-11, BLK. 3, ECHO BEACH. FOR THREE HOUSEHOLDS AND EXTERIOR USE ONLY.

PARCEL NUMBER 0-2040-005-001-A

PARCEL NUMBER 0-2040-003-009-A

PARCEL NUMBER 0-2040-003-011-A

15. Basis of Claim: Decreed

16. 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: 0

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): *John Legend* Date: 5-13-09

_____ Date: _____