

**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: 95-9920
Date Received: 03/23/2009
Receipt No.:**

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

Payment:

Date Submitted	IDWR Receipt No.	IPG Transaction Identifier	Amount
03/23/2009			\$55.00

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
HIGHWAY 54 WATER ASSN INC	PO BOX 405	ATHOL	ID	USA	83801

2. Date of Priority:

Date	Explanation
7/22/1985	

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
53N	03W	12		SE	SW	KOOTENAI

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	39	-	General household
IRRIGATION	4	-	Gardens and lawns. 4 parcels (of those listed) provide water for domestic animals.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	6 / 1	9 / 30
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.120	9.00	0.0
IRRIGATION	0.030	13.50	0.0

Totals:

CFS	AF	KW
0.030	13.50	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	4.5

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
IRRIGATION	53N	02W	18	NW	SW	KOOTENAI	-	1.5
IRRIGATION	53N	02W	18	SW	SW	KOOTENAI	-	0.6
IRRIGATION	53N	03W	12	SE	SW	KOOTENAI	-	0.3
IRRIGATION	53N	03W	12	SW	SE	KOOTENAI	-	0.3
IRRIGATION	53N	03W	13	NE	NW	KOOTENAI	-	0.3
IRRIGATION	53N	03W	13	NE	SE	KOOTENAI	-	0.3
IRRIGATION	53N	03W	13	NW	SE	KOOTENAI	-	0.3
IRRIGATION	53N	03W	13	SE	NE	KOOTENAI	-	0.6
IRRIGATION	53N	03W	13	SE	NW	KOOTENAI	-	0.3

9. Basis of Claim:

Basis	WaterRight
License	95-9920

10. 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: _____

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): _____ Date: _____
_____ Date: _____

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

President/System Operator of Hwy 54 Water Assn, Inc
Title Organization

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

President/System Operator of Hwy 54 Water Assn, Inc
Title Organization

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

Signature of Authorized Agent Randall C. Rute Date 03-13-09
Title and Organization President/System Operator
Please print name

Note: Ink changes To claim -