

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 95-9141
Date Received: 8/27/2009
Receipt No: NO21888
Received By: *lll* B

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

1. Name of Claimant(s)

DAVID MC KEOWN Phone: (208)667-4983
6305 KINGSWOOD LN
COEUR D ALENE ID USA 83814
OR
KATHERINE MC KEOWN Phone: (208)667-4983
6305 KINGSWOOD LN
COEUR D ALENE ID USA 83814

2. Date of Priority: 07/01/2002

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:
Township Range Section 1/4 of 1/4 of 1/4 Lot County Type
50N 03W 33 NE SE KOOTENAI

5. Description of diverting works:
2 hp submersible pump, 1000 gal. holding tank with 1 hp pump, and 1-1/4 inch pipe

6. Water is used for the following purposes:
Purpose From To C.F.S. (or) A.F.A.
IRRIGATION 03/15 11/15 0.02 4.5

7. Total Quantity Appropriated is:
0.02 C.F.S. and/or 4.5 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:
Township Range Section 1/4 of 1/4 Lot Use Acres
50N 03W 33 NE SE IRRIGATION 1.5
Section Acres 1.5
Total Acres 1.5

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:

~~Domestic use is for 1 home and does not include lawn, garden, landscape, or other types of irrigation.~~ *DM*

This right when combined with all other rights shall provide no more than 0.03 cfs nor more than 3.0 af per acre at the well head for irrigation of the lands above.

15. Basis of Claim: License

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 X 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): *Dore M. Kerner*

Date: 8-27-2009

Date: _____