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Form No.42-1409-1 (Internet 12/08)

**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 95-8856Date Received: 6-29-09Receipt No: AD 21060Received By: L.W.**NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

Please type or print clearly

1. Name of Claimant (s) COUGAR BAY RIDGE WATER LLC Phone (208) 209-0216Mailing Address 6600 N GOVERNMENT WAY COEUR D ALENE ID ZIP 83815

Street or Box

City

State

2. Date of Priority (Only one (1) per claim) MARCH 04, 1994
Month Day Year (YYYY)3. Source of water supply (Check one) Ground Water (✓) or Other () (a) _____
which is tributary to (b) _____4. a. Location of Point of Diversion is: Township 50N, Range 04W, Section 10,
SE, 1/4 of NE, 1/4 Govt. Lot _____, BM., County of KOOTENAI

Parcel (PIN) no. _____

Additional points of diversion if any: 50N04W-10-SE1/4 OF NE 1/4 KOOTENAI COUNTY

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. WELL PUMP TAG #D0039760 @ 100HPWELL PUMP TAG # D0039621 @ 100HP

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6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD) (cfs) (acre feet)

For MUNICIPAL purposes from 01/01 to 12/31 amount 1.00 or 228.0

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1.00 (cfs) and/or (b) 228.0 (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) DOMESTIC - 120

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
50N	04W	21	13	13		13									13				52
			M/D	M/D		M/D									M/D				

Parcel (PIN) no(s). _____

Total number of acres irrigated 52

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 () No (✓)

If your 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 (✓)

13. Remarks: COUGAR BAY RIDGE WATER LLC (CBRW) PROVIDES A DOMESTIC WATER SUPPLY SYSTEM FO RTH EAREA INDICATED AND DESCRIBED IN THE FOLLOWING ATTACHMENTS:

DESCRIPTION OF PLACE OF USE

WATER RIGHT LICENSE

Last Name CBRW

Identification No. 95-8856

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Digital Boundary for Cougar Bay Ridge Water, LLC

[illegible]

A horizontal scale bar with markings at 0, 1, and 2 miles.



- Place of use.shp
Township/Range
Sections

95-8856
CBRW.

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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-08856

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: TWO

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

MANAGING MEMBER of COUGAR BAY RIDGE WATER LLC,
Title Organization

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

MANAGING MEMBER of COUGAR BAY RIDGE WATER LLC,
Title Organization

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

Signature of Authorized Agent [Signature] Date 6-2-09

Title and Organization Managing Member

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 CBRW

Identification No. 95-8856

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