

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 95-9580

Date Received: 07/07/09

Receipt No: NO21163 B

Received By: N. Steuding

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Fareham Village Property Assn, Inc. Phone 208-683-2450
Mailing Address P.O. Box 55 Arvin Id ZIP 83801
Street or Box City State
2. Date of Priority (Only one (1) per claim) Nov. 13, 1970
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 53N, Range 02W, Section 17
NW, 1/4 of NW, 1/4 Govt. Lot _____, BM., County of Kootenai
Parcel (PIN) no WR 95-9580

Additional points of diversion if any: _____

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. 1- 450 Dep well, 40 HP Pump - Water

Storage, Pressure Tank, Water pipe in ground - Water Lines
to 491 House hold -

SCANNED

JUL - 7 2009

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD) (cfs) (acre feet)
For Municipal purposes from JAN 1 to Dec 31 amount 0.650 or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

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

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) Domestic - 49 households

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	
52N	02W	17		Y			X	X	X	X		X							

Parcel (PIN) no(s). WR-9580

Total number of acres irrigated _____

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 (X)
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.

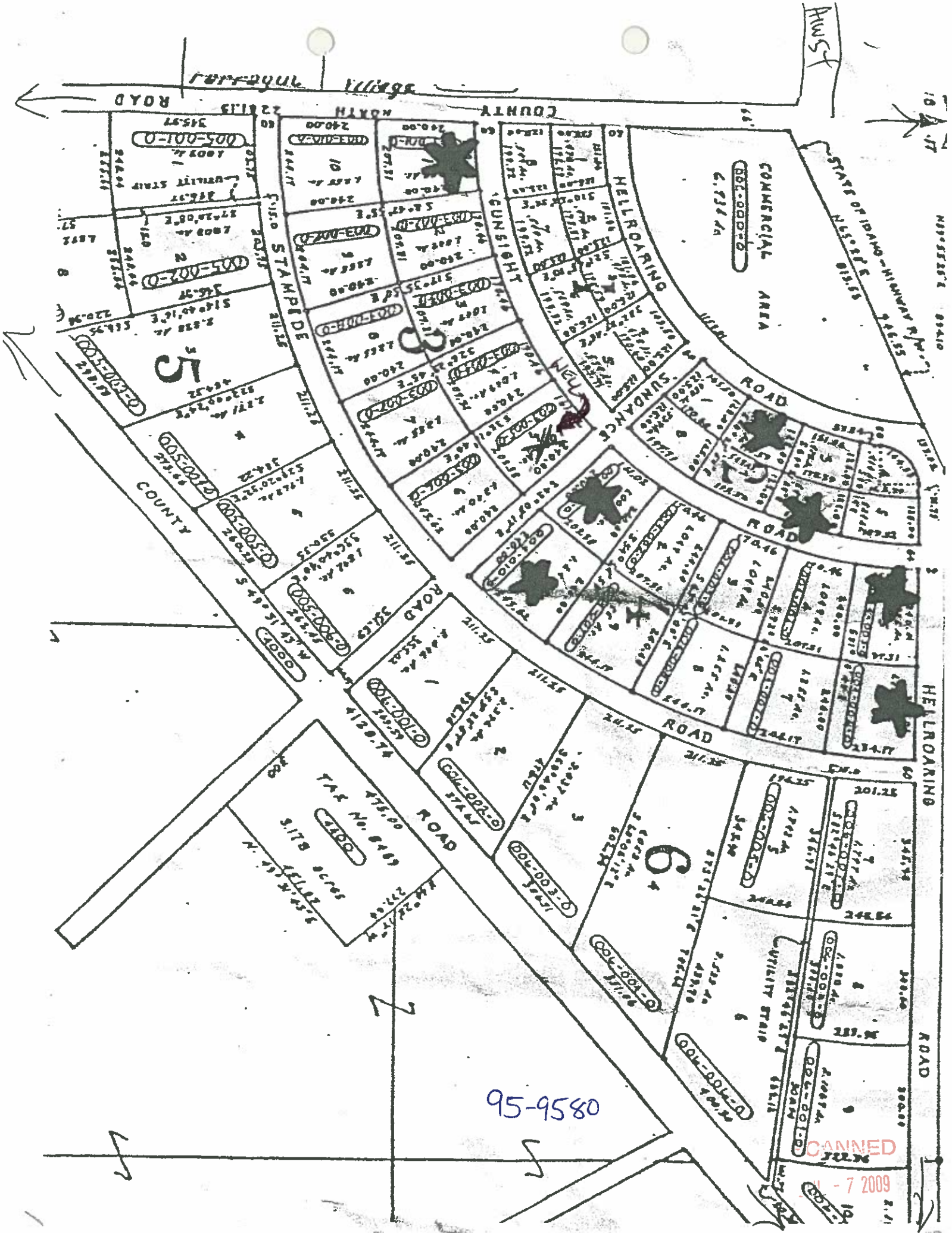
Water Right 95-9968 or None ()

13. Remarks: Elected officer Chairman of the Board

PWS ID 1280070

Last Name _____ Identification No. 95-9580

JUL - 7 2009



ROAD

STAMPIDE

ROAD

COUNTY

HELROARING

COMMERCIAL AREA

000-000-00

ROAD

ROAD

ROAD

HELROARING

ROAD

5

6

95-9580

CANNED

7 2009

TAX No. 848

3.178

5.55

5.55

5.55

5.55

5.55

5.55

5.55

5.55

5.55

5.55

5.55

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 WR 95-9580

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: _____

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

CHAIRMAN of FARNAGUT Village Property Assn. Inc.
Title Organization

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

CHAIRMAN of FARNAGUT Village Property Assn. Inc.
Title Organization

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

Signature of Authorized Agent Wesley Rob Hilde Date JUNE 12, 2009

Title and Organization CHAIRMAN - FARNAGUT Village Property Assn. Inc.

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 _____

Address _____

Date _____

Last Name _____ Identification No. 95-9580

JUL - 7 2009