

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 95-08929
Date Received: 8-14-09
Receipt No: NO 21756
Received By: cm

RECEIVED

AUG 14 2009

IDWR/North

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

1. Name of Claimant(s)

MARY ERBLAND Phone: (208) 689-3642
PO BOX 26
HARRISON, ID 83833-0026

CHARMAINE MOORE Phone: (208) 689-3401
PO BOX 26
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DENNIS VERMILLION Phone: (509) 927-7578
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RHONDA L BLAIR Phone: (509) 332-0154
440 NW MARYLAND
PULLMAN, WA 99163

THOMAS C FAULKNER Phone: (509) 332-0154
440 NW MARYLAND CT
PULLMAN, WA 99163

2. Date of Priority: 09/21/1995

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot			County	Type
48N	04W	15	SW	SE	L2	~~WASHINGTON~~ KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	3/15	11/15	0.04	7.5
DOMESTIC	01/01	12/31	0.04	3.0

7. Total Quantity Appropriated is:

0.04 C.F.S.

10.5 AF

8. Total consumptive use:

9. Non-irrigation uses:

Place of use is located within Lots 11, 12-S, 12-2, 12-3, & 12-N, 1st Addition to Newton's subdivision

Domestic use is for 5 homes

Domestic use does not include lawn, garden, landscape, or other types of irrigation.

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot			Use	Acres
48N	04W	15	SW	SE	L2	IRRIGATION	2.5
48N	04W	15	SW	SE	L2	DOMESTIC	
Section Acres							2.5
Total Acres							2.5

11. Place of use in counties: ~~WASHINGTON~~ KOOTENAI

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

13. Other Water Rights Used:

14. Remarks:

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 ☒ 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):	<u>Mary E. Ebbard</u>	Date:	<u>08/10/09</u>
	<u>Charmaine Moore</u>	Date:	<u>7-30-09</u>
	<u>De P. Cull</u>	Date:	<u>8-3-09</u>
	<u>Eileen Thorpe</u>	Date:	<u>7-31-09</u>
	<u>J. L. Hance</u>	Date:	<u>7-30-09</u>
	<u>Jan S. Holz</u>	Date:	<u>7-16-09</u>
	<u>Lucia M. McCarty</u>	Date:	<u>7-16-09</u>
	<u>Rhonda L. Blair</u>	Date:	<u>7/18/09</u>
	<u>Ken Hawn</u>	Date:	<u>7/18/09</u>