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Receipt #
N022833

Claim Number:	95-11397
Claim Fee:	\$50.00
Claimant(s):	KOOTENAI COUNTY P.O. BOX 9000 COEUR D'ALENE , ID 83816
Claimed Purpose(s) of Use:	FIRE PROTECTION

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Office address and phone number:
Idaho Department of Water Resources
7600 Mineral Dr. Suite 100
Coeur d'Alene, ID 83815
(208) 762-2800

**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: 95-11397
Date Received: 11/13/09
Receipt No.: NO 22833

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
KOOTENAI COUNTY	P.O. BOX 9000	COEUR D'ALENE	ID	USA	83816

2. Date of Priority:

Date	Explanation
7/10/1968	According to the Report of Well Driller on file with the Kootenai County Assessor's Office work on this well finished on July 10, 1968.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
51N	04W	15		NE	NE	KOOTENAI

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

Water Use	Number Of Homes	Stock	Description
FIRE PROTECTION	-	-	This well is located at the Kootenai County Airport. Currently the well has no pump system installed, but is being held open in case of fire or other emergency. In such case a pump could be quickly placed in the well to provide emergency water. The quantity of water claimed is based upon the data available in the 1968 well report on file with the Kootenai County Assessor.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
FIRE PROTECTION	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
FIRE PROTECTION	0.440	0.00	0.0

Totals:

CFS	AF	KW
0.440	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
FIRE PROTECTION	51N	04W	15	NE	NE	KOOTENAI	-	-

9. Basis of Claim:

Basis
Beneficial Use

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: I will report

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

_____ of _____
 Title Organization

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

_____ of _____
 Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please print name