

**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 49576
NUMBER:
Ident. 94-7755
Number:
Date
Received:
Receipt No.: T091861**

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

**RECEIVED
OCT 12 2010**

1. Name of Claimant(s):

IDWR/NORTHERN

Name	Address	City	State	Country	Postal Code
BRETT AND SUSAN HYSELL	15846 S WINTON ROAD	CATALDO	ID	USA	83810

2. Date of Priority:

Date	Explanation
1/1/1997	Based on the real estate listing the manufactured home was placed on the property in 1997. We purchased it in 1998.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
48N	01W	4		SE	SW	KOOTENAI

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

**SCANNED
OCT 18 2010**

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	

claim #
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6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.010	0.00	0.0

Totals:

CFS	AF	KW
0.010	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	48N	01W	4	SE	SW	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 "How you will receive notice in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I ___ 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 foregoing document are true and correct.

Signature of Claimant(s): _____

Date: 10/4/10

Date: 10-4-2010

SCANNED
OCT -18 2010

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

claim #
94-7755

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OCT 18 2010