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**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 95-8115Date Received: 9/4/09Receipt No: N021996Received By: JD

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

Please type or print clearly

1. Name of Claimant (s) CHATEAUX WATER ASSOCIATION, INC. Phone (208) 772-9913Mailing Address PO BOX 205 HAYDEN IDAHO ZIP 83835
Street or Box City State2. Date of Priority (Only one (1) per claim) JULY 7, 1981
Month Day Year (YYYY)3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____4. a. Location of Point of Diversion is: Township S1N, Range 4W, Section 22,
NW, 1/4 of SE, 1/4 Govt. Lot _____, BM., County of _____Parcel (PIN) no. H-1040-003-001-0Additional points of diversion if any: N/A

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. _____

PERMIT # 95-74-N-75, WELL COMPLETED IN 1974. RESERVOIR
CAPACITY = 30000 GALLONS.

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6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For DOMESTIC purposes from JANUARY 1 to DEC 31 amount .52 or 66.0

For IRRIGATION purposes from APRIL 1 to NOV 1 amount .24 or 36.0

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .52 (cfs) and/or (b) 102.0 (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) DOMESTIC USE IN A SUBDIVISION WITH 110 HOMES

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	
51N	4W	22														D			
51N	4W	22														12			12

Parcel (PIN) no(s) (SEE ATTACHED MAP)

Total number of acres irrigated 12

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 ☐ MEMBERS OF ASSOCIATION
If your answer is No, describe in Remarks below the authority you have to claim this water right. OWNS LOTS.

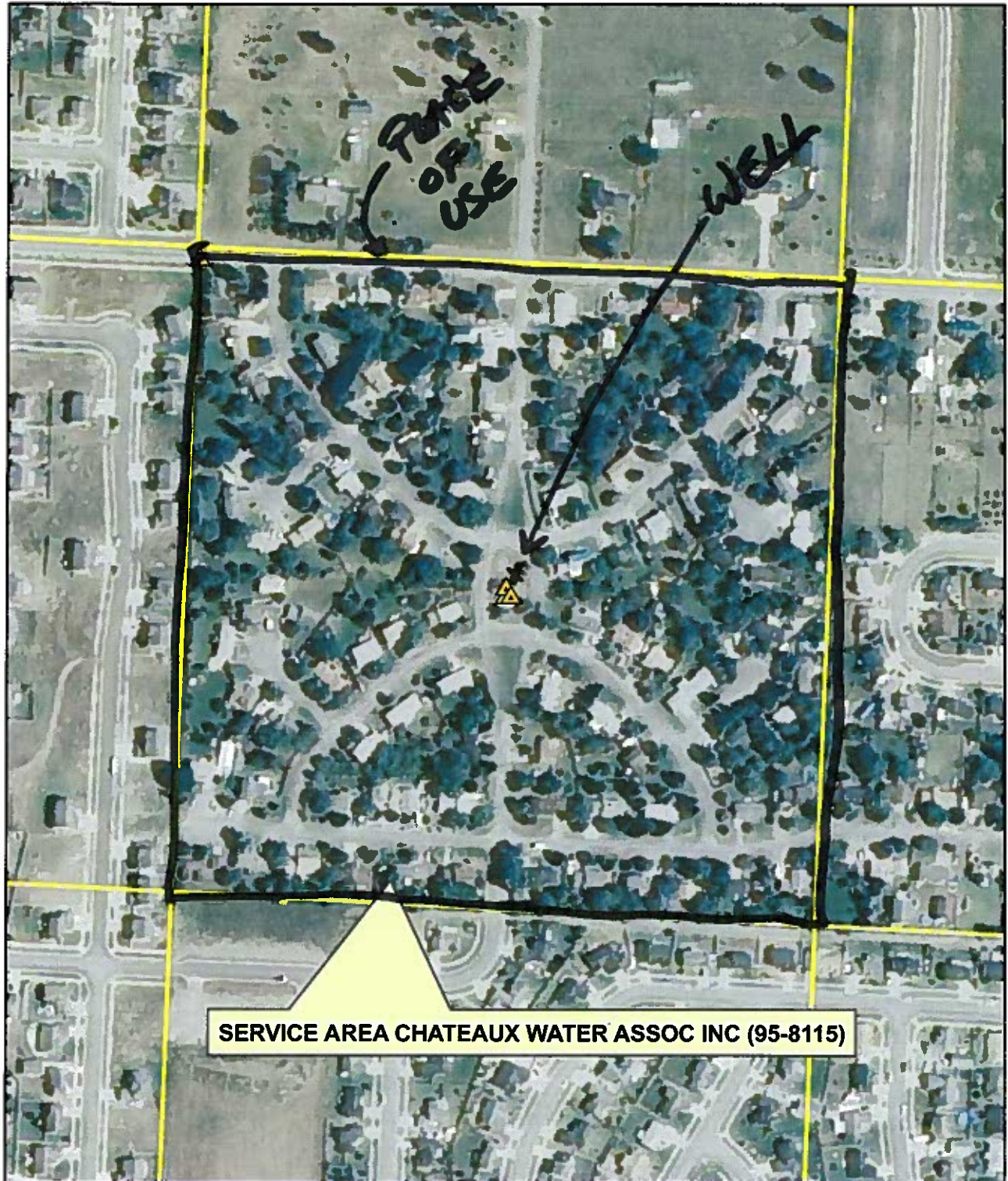
12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ()

13. Remarks: WELL IDEQ TAG FO 005152. PUBLIC WATER SUPPLY #
1280046. THERE IS 110 HOMES WITHIN SERVICE AREA AND
EACH HOME/LOT HAS INDIVIDUAL PARCEL NUMBERS.

Last Name CHATEAUX WATER ASSOC. Identification No. 95-8115

CHATEAUX WATER ASSOC, INC



95-8115 COANNED

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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-8115

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 (X) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 3

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

PRESIDENT of CHATEAUX WATER ASSOCIATION, INC.,
Title Organization

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

PRESIDENT of CHATEAUX WATER ASSOCIATION, INC.,
Title Organization

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

Signature of Authorized Agent [Signature] Date 9/28/2009

Title and Organization PRESIDENT, CHATEAUX WATER ASSOCIATION, 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 CHATEAUX WATER ASSOC. Identification No. 95-8115

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