

**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:

92-10093

Date Received:

12-21-10

Receipt No.:

NO26382 A
ChA

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

**RECEIVED
DEC 21 2010
IDWR/North**

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
SHERRY A. MOORE	2368 ST MARIES AVE	ST MARIES	ID	USA	83861
ALAN M. MOORE	2368 ST MARIES AVE	ST MARIES	ID	USA	83861

2. Date of Priority:

Date	Explanation
12/31/1922	YEAR HOME WAS BUILT

3. Source:

Source	Tributary	Type
UNNAMED STREAM	CHERRY CREEK	INSTREAM BEGINNING
UNNAMED STREAM	CHERRY CREEK	INSTREAM ENDING

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
46N	02W	21		SW	NE	BENEWAH
46N	02W	21		SW	NE	BENEWAH

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

Water Use	Number Of Homes	Stock		Description
STOCKWATER	-	Type of Stock	Number of Stock	
		Mixed Stock	11 - 25	

6. Season(s) of Use:

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

7. Quantity:

Water Use	CFS	AF	KW
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.020	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
STOCKWATER	46N	02W	21	SW	NE	BENEWAH	-	-

9. Basis of Claim:

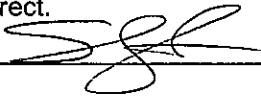
Basis
Beneficial Use

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: 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):  Date: 12/21/10
 _____ 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