

**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: 91-7286
Date Received: 03/08/2011 *dm*
Receipt No.: 1026692

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
GERALD O. BROOKS	240 GRASSY MOUNTAIN LANE	ST MARIES	ID	USA	83861
MARY E. BROOKS	240 GRASSY MOUNTAIN LANE	ST MARIES	ID	USA	83861

2. Date of Priority:

Date	Explanation
5/31/2006	ELECTRICAL POWER WAS PROVIDED BY AVISTA UTILITIES TO WELL D0041203 (DRILLING PERMIT NO 838355) ON MAY 31 2006. (SEE ATTACHMENT)

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
46N	02W	2		NW	SW	BENEWAH

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

Water Use	Number Of Homes	Stock	Description
DOMESTIC	2	-	WATER PROVIDED TO TWO CAMPER RV SITES AND LATER TO ONE CAMPER SITE AND A HOME. THE SITES ARE PHYSICALLY EPERATED WITH A SPIGOT OR FROST FREE AT EACH LOCATION. THE SITES HAVE THE SAME OWNER.

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	0.040	0.00	0.0

Totals:

CFS	AF	KW
0.040	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	46N	02W	2	NW	SW	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: 1

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):

David D. Brooks
Mary E. Brooks

Date: 3-8-11

Date: 3-8-11

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