

**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:

91-7271

Date Received:

2 - 23 - 11

Receipt No.:

NO 26636 B

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

Received

FEB 23 2011

IDWR/NORTHERN

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DUANE L. PIERCE SR.	65 GRANDMA'S WAY	ST MARIES	ID	USA	83861
CATHERINE A. PIERCE	65 GRANDMA'S WAY	ST MARIES	ID	USA	83861

2. Date of Priority:

Date	Explanation
4/29/1913	LAND PATYENT DATED APRIL 29, 1913 ACCORDING TO ABSTRACT OF TITLE.

3. Source:

Source	Tributary	Type
SPRING	SINKS	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
46N	02W	17	1	NE	NE	BENEWAH

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

Water Use	Number Of Homes	Stock		Description
DOMESTIC	1	-		
STOCKWATER	-	Type of Stock	Number of Stock	PIGS SHEEP HORSES
		Mixed Stock	1 - 10	

6. Season(s) of Use:

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

SCANNED

FEB 7 3 2011

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.040	0.00	0.0
STOCKWATER	0.020	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	17	NE	NE	BENEWAH	1	-
STOCKWATER	46N	02W	17	NE	NE	BENEWAH	1	-

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.

X Number of attachments: 6

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.

X Signature of Claimant(s): Catherine A. Peirce Date: 2/18/2011
Shirley J. Peirce Sr. Date: 2-18-11

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

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