

filing fee \$25.00

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 95-14457Date Received: 10-20-09Receipt No: N022528Received By: W

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s) ANNETTE PARENT Phone 208-773-4180Mailing Address 3350 S CARPENTER LOOP City POST FALLS ID Zip 83850
Street or Box City State2. Date of Priority: (Only one per claim) 9-20-9
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water () or Other () (a) Spring has nothing to do
which is tributary to (b) with the city or river or lakes comes out of the hills4. Location of Point of Diversion is: Township 50 (fifty N) Range 5 (five W) Section (20) - (19)
1/4 of 1/4, or Govt. Lot _____ BM. County of KootenaiParcel (PIN) no. (50N05W20 3370) - (50N 5W 1900 70)Additional points of diversion if any: pump & pipeline going to mabels home

If available, GPS coordinates: _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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. 2 ft deep 1 box - 3' by 3' 1 - 4' by 3' - 2 ft deepThis spring runs into 2 spring boxes which goes in a holding tank, holds about 1000 gal of water. This was all here when we moved here in 1955.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Household purposes from 1-1 to 12-31 amount 0.04 cfs () or AFY ()For _____ purposes from _____ to _____ amount 0.047. Total Quantity claimed 0.04 cfs () or AFY ()8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership: 1 - Household)Stockwater and Number of livestock None

SCANNED

OCT 20 2009

9. Location of Place of Use is: Township 50 N, Range 5, Section 20 ^{Section 19} _{Section 19}
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
for (Check One) **Domestic** ☒ **Stock** () **Domestic and Stock** () If different than shown in Item 4

Additional places of use, if any _____

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 ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

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

_____ or None ()

13. Remarks:

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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

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 ☒ 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 contained in the foregoing document are true and correct.

Signature of Claimant (s) Annette M. Parent Date: 9-20-09

_____ 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 _____

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 _____ Date _____

Address _____

Last Name _____ Identification No. 95-14457

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*But
Description of
my land was
postpaid and*

Lots four (4) and five (5) of Section twenty (20); ALSO all of that part of the northeast quarter of the northeast quarter (NE1/4NE1/4) of section nineteen (19) lying east of the County Road as laid out across the above-described northeast quarter of the northeast quarter (NE1/4NE1/4) of section nineteen (19); ALSO, all that part of the southeast quarter of the northeast quarter (SE1/4NE1/4) of section nineteen (19), lying east of the County Road as laid out across the above-described property; all being in Township fifty (50) North Range Five (5) West, Boise Meridian.

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*If you have any questions
call me I'll be glad to help
Knowledge Hope they are right*

Sincerely

*Annette H. Parent
3350 S. Carpenter Loop
Post Falls, Ida
83854*

Ph. No 208 772 4180

95-14457