

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 95-8682  
Date Received: 4/26/2010  
Receipt No: NO 24178  
Received By: *WA*

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

1. Name of Claimant(s)

RICHARD V MC KERNAN Phone: (208)765-9068  
PO BOX 2052  
COEUR D ALENE ID USA 83816  
OR  
STEVE PENNINGTON Phone: (208)765-9068  
C/O RICHARD MC KERNAN  
PO BOX 2052  
COEUR D ALENE ID USA 83816  
OR  
TAD LEACH Phone: (208)765-9068  
C/O RICHARD MC KERNAN  
PO BOX 2052  
COEUR D ALENE ID USA 83816

2. Date of Priority: 01/31/1991

3. Source: COEUR D ALENE LAKE Trib. to: SPOKANE RIVER

4. Point of Diversion:

| Township | Range | Section | 1/4 of 1/4 of 1/4 Lot | County   | Type |
|----------|-------|---------|-----------------------|----------|------|
| 49N      | 04W   | 10      | SW NW 3               | KOOTENAI |      |

5. Description of diverting works:

6. Water is used for the following purposes:

| Purpose  | From  | To    | C.F.S. | (or) A.F.A |
|----------|-------|-------|--------|------------|
| DOMESTIC | 01/01 | 12/31 | 0.08   | 3.6        |

7. Total Quantity Appropriated is:  
0.08 C.F.S. and/or 3.6 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:  
Number of homes: 3

10. Place of use:  
Township      Range Section      1/4 of 1/4 Lot      Use      Acres  
49N            04W    10            SW      NW      3      DOMESTIC

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used: NONE

14. Remarks:  
Domestic use is for 3 homes.

15. Basis of Claim: License

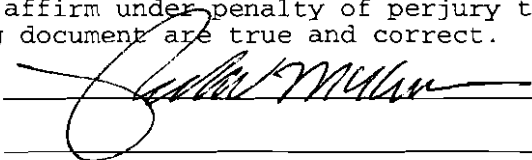
16. Signature(s)

(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: 4/26/10  
\_\_\_\_\_  
Date: \_\_\_\_\_