

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 95-8099

Date Received: 3/11/10

Receipt No: 0924294 A

Received By: Ree

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Mary Elaine Jolly And/or Michael R Jolly (son) Phone (208) 664-3205

Mailing Address 5387 W Highland Dr. Coeur d'Alene Idaho ZIP 83814
Street or Box City State

2. Date of Priority (Only one (1) per claim) 5-19-1981
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____

4. a. Location of Point of Diversion is: Township 50 North, Range 4 W, Section 8,
SW, 1/4 of SE, 1/4 Govt. Lot _____, BM., County of Kootenai

Parcel (PIN) no. -8800

Additional points of diversion if any: _____

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

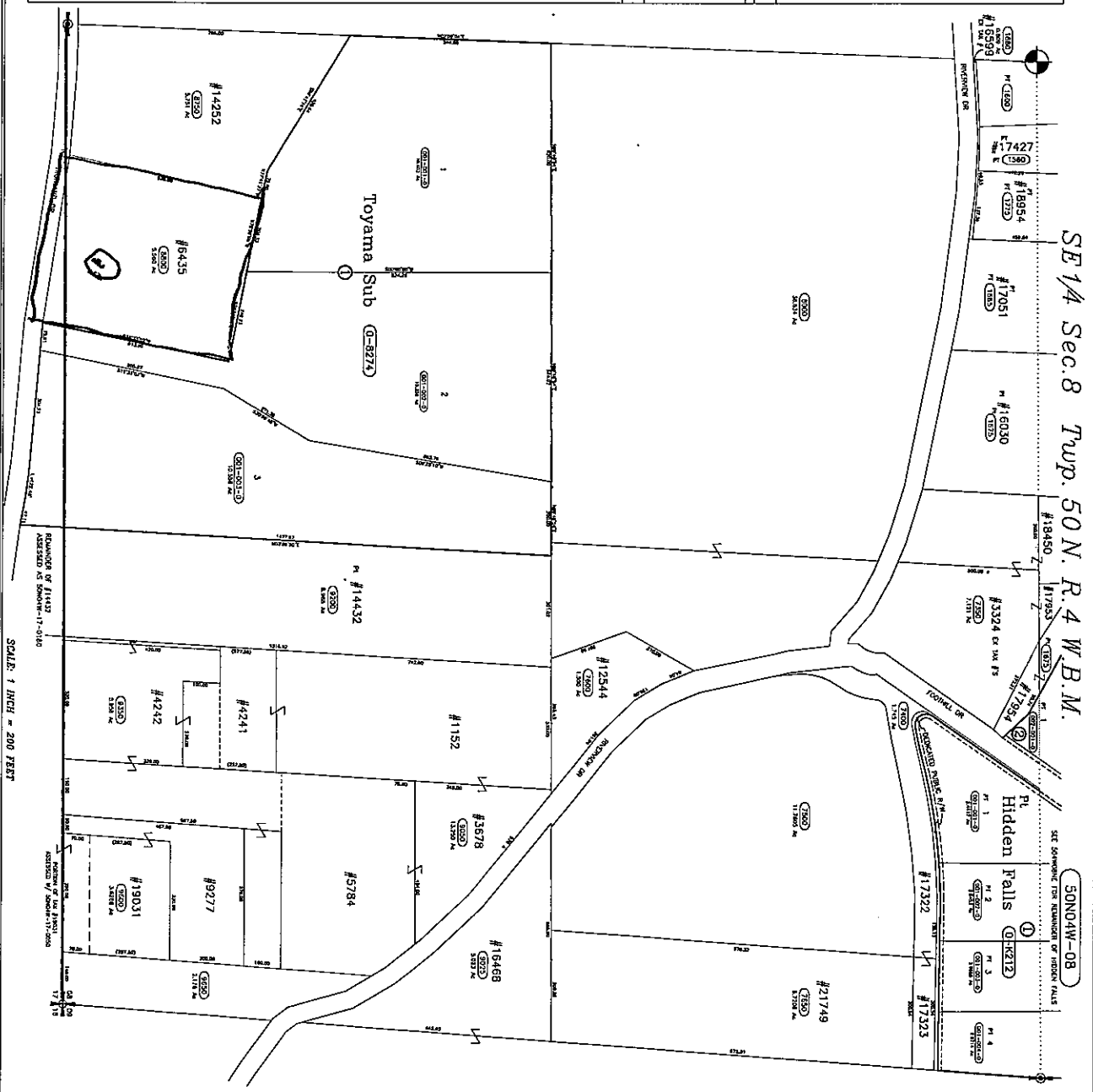
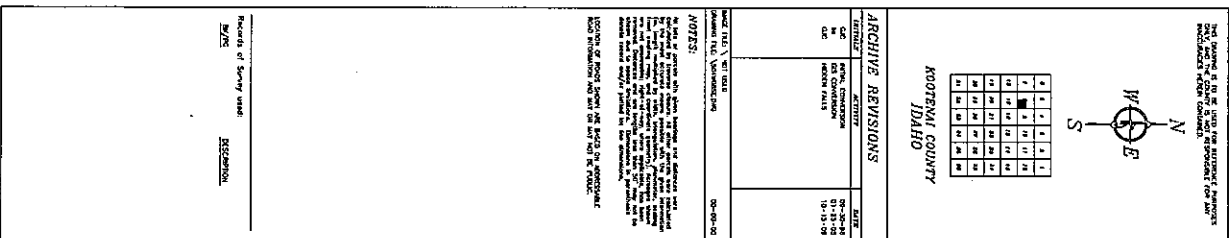
Govt. Lot _____, BM., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. _____

Well and Pump

The revision dates below represent the file save dates for the posting of the listed revisions.
The archive dates for these revisions are posted within the ARCHIVE REVISIONS box in the drawing title block.

09/30/98 - QAC
5004W-08-7500 out of 7500 and 2300 (38)
Pin at 5004W-08-1675 on #1765 combined w/ 7350 (98)
10/12/98 - bc
5004W-08-7360 out of 7350 (98)
10/21/98 - VMC
Pin #1765 out of 5004W-08-7350 and combined w/ 1675 (98)
Pin #1765 out of 5004W-08-1675 and combined w/ 7350 (98)
12/17/98 QAC VMC
Pin #1685 out of 5004W-08-1675 and combined w/ 7350 (98)
10/13/00 - VMC
5004W-08-9375 combined w/ 9500 (01)
04/25/01 - VMC
Pin at 5004W-08-1540 combined w/ 1775 and redacted
as Tax #18954 (02)
07/23/01 - VMC
5004W-08-9600 redacted on Tax #16031 (01)
06/12/02 - VMC
5004W-08-9550 combined w/ 9600 (02)
12/16/04 - SLW
5004W-08-1800 (in NE) out of 2300 (05)
07/26/06 - ET
Pin of 5004W-08-6600 combined w/ 5004W-17-0056 (37)
01/31/07 - SLW
5004W-08-7360 combined w/ 7350 (07)
09/04/07 - EH
5004W-08-1800 out of 2300 described as Tax#1 21560 & 12616
#17355 out of 2300 (Pin 1621716 in S14) as non-conf
as Tax #2608
01/09/08 - EH
5004W-08-7360 out of 7350 as Tax #21749 and remender
5004W-08-2000 out of 7500 (06) Tax #21751 (09)
08/20/08 - JB
5004W-08-7225 combined w/1900 (09)
5004W-08-2300 new 7500 to reflect geo location (09)
5004W-08-2000 new 7500 to reflect geo location (09)
10/16/09 - QAC
5004W-08-1800 7300 7300 paired into HIDDEN FALLS (10)



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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 958099

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) Michael R Jolly Date: 5/11/2010

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

Title of _____ Organization

that I have signed the foregoing document in the space below as

Title of _____ 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 _____

Address _____

Date _____

Last Name _____ Identification No. _____