

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 95-12557
Date Received: 5/20/2010
Receipt No: NO24417 B
Received By: *AM*

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

1. Name of Claimant(s)

WILDMAN FAMILY LIMITED PARTNERSHIP Phone: (208)667-1439
6752 S WILDMAN LN
COEUR D ALENE ID USA 83814

2. Date of Priority: 12/31/1920

3. Source: SPRING Trib. to: SINKS

4. Point of Diversion:
Township Range Section 1/4 of 1/4 of 1/4 Lot County Type
49N 04W 11 NW NW KOOTENAI

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.03	
STOCKWATER STORAGE	01/01	12/31		2.5
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
49N	04W	10	NE	NE	DOMESTIC	
			NE	NE	STOCKWATER	
49N	04W	11	NW	NW	STOCKWATER	
			NW	NW	STOCKWATER STORAGE	

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:

15. Basis of Claim: Beneficial Use

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 ~~X~~ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1

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 _____ and that the
Title Organization

statements contained in the foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

Date

LESTER WILDMAN