

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 94-7655
Date Received: 7/15/2010
Receipt No: 0025211
Received By: *WA* *A*

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)

JOHN MILLER TRUST Phone: (208)682-2774
25566 E MEADOW RD
CATALDO ID USA 83810

2. Date of Priority: 12/31/1949

3. Source: UNNAMED STREAM Trib. to: FOURTH OF JULY CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 Lot	County	Type
49N	01W	34	SE	SE		KOOTENAI	Beginning Point
49N	01W	34	SE	SE		KOOTENAI	Ending Point

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	0.02	

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
48N	01W	3	NE	NE	1	STOCKWATER	
			NW	NE	2	STOCKWATER	
49N	01W	34	SE	SW		STOCKWATER	
			SW	SE		STOCKWATER	
			SE	SE		STOCKWATER	

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

TRUSTEE of John Miller Trust
Title Organization

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

TRUSTEE of John Miller Trust

and that the statements contained in the foregoing document are true and correct.

Nancy Miller Erickson
Signature of Authorized Agent NANCY MILLER ERICKSON

TRUSTEE
Title and Organization

7-15-2010
Date