

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 49576
NUMBER:
Ident. 91-7239
Number:
Date 4/22/11
Received:
Receipt No.: N026978
b

RECEIVED

APR 22 2011

IDWR / NORTH

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
GARY FOUNTAIN	C/O GARY FOUNTAIN	GLENDALE	CA	USA	91208

2. Date of Priority:

Date	Explanation
1/10/1915	← SEE ATTACHED COPY OF "EXPLANATION".

3. Source:

Source	Tributary	Type
GROUND WATER	GROUND WATER	
GROUND WATER	GROUND WATER	
GROUND WATER	GROUND WATER	
ST JOE RIVER	COEUR D ALENE LAKE	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
46N	02W	17	1			BENEWAH
46N	02W	17	1			BENEWAH
46N	02W	17	1			BENEWAH
46N	02W	17	1			BENEWAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
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6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	13.330	0.00	0.0

Totals:

CFS	AF	KW
13.330	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	46N	02W	17	NE	NE	BENEWAH	1	-
DOMESTIC	46N	02W	17	NW	NE	BENEWAH	-	-
DOMESTIC	46N	02W	17	NW	NE	BENEWAH	1	-

9. Basis of Claim:

Basis

Beneficial Use

10. 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: 2 + CHECK NO. 7612 IN THE AMOUNT OF \$25.00

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: 4-18-2011
 _____ 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

Print Claim Stub

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Thank you for submitting your claim to IDWR.
If paying in person, please print this page and bring it with you.
If paying by mail, make sure to enclose a copy of this page with your payment.

If you experience printing problems or do not have a printer, copy this information and include it with your payment.
Please type or write clearly. Please include the claim number shown below on any supporting documents you submit to IDWR.

[Print This Page](#)

Claim Number:	91-7239
Claim Fee:	\$25.00
Claimant(s):	GARY FOUNTAIN
	C/O GARY FOUNTAIN
	GLENDAL , CA
	91208
Claimed Purpose(s) of Use:	DOMESTIC

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Office address and phone number:
Idaho Department of Water Resources
7600 Mineral Dr. Suite 100
Coeur d'Alene, ID 83815
(208) 762-2800