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**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: 92-10311**  
**Date Received: 5/24/2011**  
**Receipt No.: NO27273C**

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

**1. Name of Claimant(s):**

| Name           | Address       | City      | State | Country | Postal Code |
|----------------|---------------|-----------|-------|---------|-------------|
| H. DALE DIMICO | 999 BUTLER DR | ST MARIES | ID    | USA     | 83861       |

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**2. Date of Priority:**

| Date      | Explanation                |
|-----------|----------------------------|
| 5/14/1920 | LAND PATEMT 749404 GRIFFIN |

**3. Source:**

| Source         | Tributary       | Type               |
|----------------|-----------------|--------------------|
| UNNAMED STREAM | TWO BIT CREEK   | INSTREAM BEGINNING |
| UNNAMED STREAM | TWO BIT CREEK   | INSTREAM ENDING    |
| UNNAMED STREAM | TWO BIT CREEK   | INSTREAM BEGINNING |
| UNNAMED STREAM | TWO BIT CREEK   | INSTREAM ENDING    |
| TWO BIT CREEK  | ST MARIES RIVER | INSTREAM BEGINNING |
| TWO BIT CREEK  | ST MARIES RIVER | INSTREAM ENDING    |

**4. Point Of Diversion:**

| Township | Range | Section | Gov Lot | QQ | Q  | County   |
|----------|-------|---------|---------|----|----|----------|
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |
| 42N      | 02E   | 2       |         | SW | SW | SHOSHONE |

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

| Water Use | Number Of Homes | Stock | Description |
|-----------|-----------------|-------|-------------|
|           |                 |       |             |

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| STOCKWATER    | -               | <table><tr><th>Type of Stock</th><th>Number of Stock</th></tr><tr><td>Cattle</td><td>26 - 50</td></tr></table> | Type of Stock | Number of Stock | Cattle | 26 - 50 |
|---------------|-----------------|----------------------------------------------------------------------------------------------------------------|---------------|-----------------|--------|---------|
| Type of Stock | Number of Stock |                                                                                                                |               |                 |        |         |
| Cattle        | 26 - 50         |                                                                                                                |               |                 |        |         |

**6. Season(s) of Use:**

| Water Use  | From Month/Day | To Month/Day |
|------------|----------------|--------------|
| STOCKWATER | 1 / 1          | 12 / 31      |

**7. Quantity:**

| Water Use  | CFS   | AF   | KW  |
|------------|-------|------|-----|
| STOCKWATER | 0.020 | 0.00 | 0.0 |

**Totals:**

| CFS   | AF   | KW |
|-------|------|----|
| 0.020 | 0.00 |    |

**8. Place of Use:**

| Water Use  | Township | Range | Section | QQ | Q  | County  | Gov Lot | Acreage |
|------------|----------|-------|---------|----|----|---------|---------|---------|
| STOCKWATER | 42N      | 02E   | 2       | SW | SW | BENEWAH | -       | -       |

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

Number of attachments: 1

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): [Signature] Date: May 24 - 11

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

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

Signature of Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_