

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

Date Received: 7/10/2009

Receipt No: N021232

Received By: Jm

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) N01 D/S Howard Revocable Trust Phone 208 683-2761

Mailing Address 12504 E. Nunn Rd. Athol ZIP 83801

2. Date of Priority (Only one (1) per claim) 8/10/1978
City State Month Day Year (YYYY)

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

4. a. Location of Point of Diversion is: Township 53N, Range 2W, Section 31,
NE, 1/4 of NE, 1/4 Govt. Lot —, BM., County of Kootenai, Co.

Parcel (PIN) no. 53N02W-31-0250

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.

Large pipe sunk into ground to below creek level.
Smaller pipe below creek level brings water
into larger pipe from which water is pumped.

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Irrigation purposes from 3/15 to 11/15 amount .03 or 7.0

For Stock water purposes from 1/1 to 12/31 amount .02 or .2

For Domestic purposes from 1/1 to 12/31 amount .03 or 1.2

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .03 (cfs) and/or (b) 8.4 (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) one household - several horses

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
53N	2W	31	2																2
53N	2W	31	S																
53N	2W	31	D																

Parcel (PIN) no(s). 53N02W-31-0250

Total number of acres irrigated 2

10. In which county (ies) are lands listed above as place of use located? _____

11. Do you own the property listed above as place of use? Yes (✓) No ()

If your answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

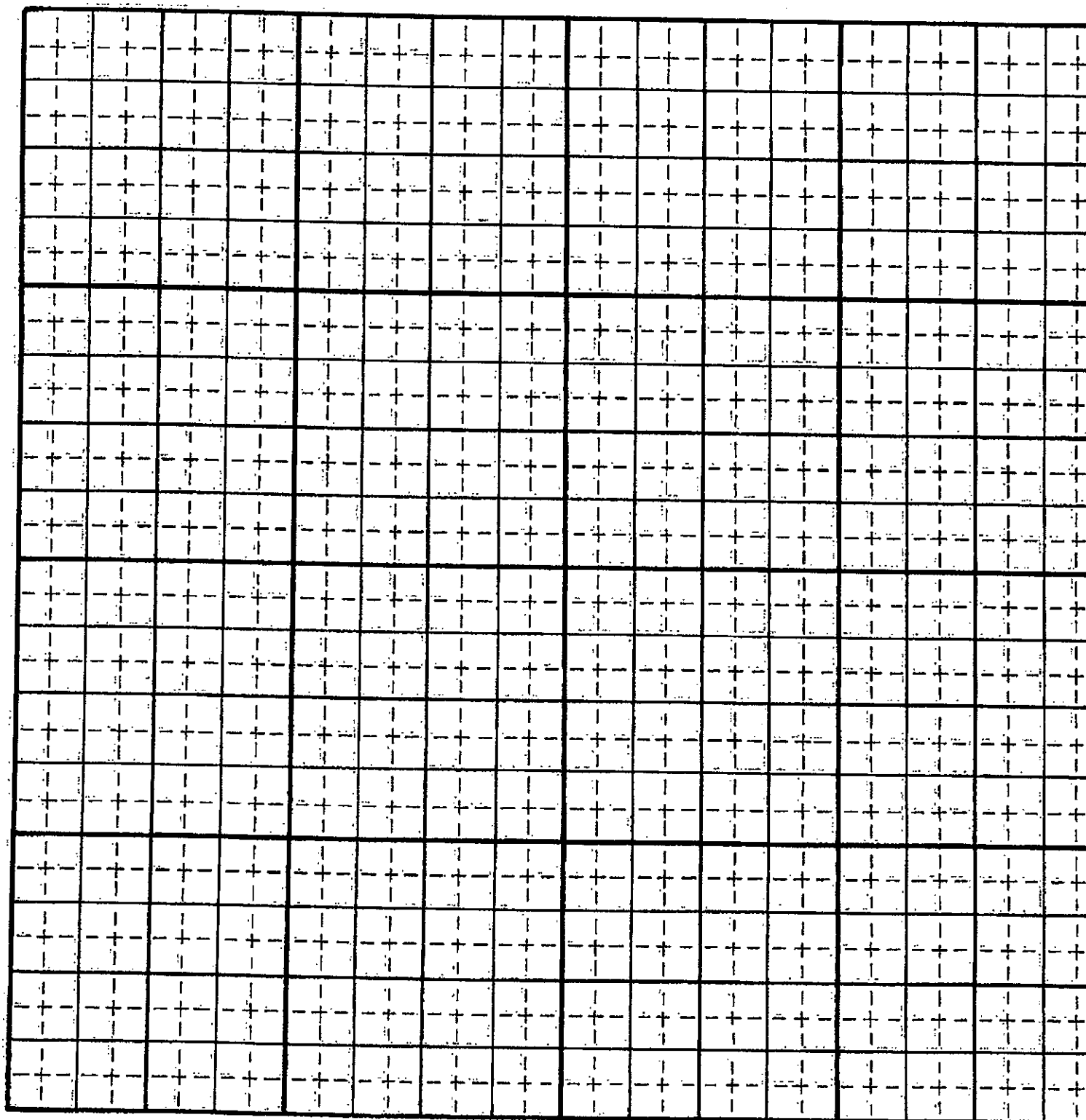
Well - 95-9848 Irrigation, Stock Water, 1 or None ()

13. Remarks: D/S Howard NO 1 Revocable Domestic Trust
DTD 8/6/96

Last Name Howard Trust Identification No. _____

Map of Project: Attach aerial photograph or topographic map showing clearly the point of diversion, place of use, section number, township, and range number, unless unavailable. Otherwise sketch the elements above on the grid below.

Scale: 2 Inches equals 1 mile



Last Name _____ Identification No. _____

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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-9847

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: 2- map and license

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) Shirley A. Howard Date: 7/10/09
_____ Date: _____

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

Trustee of D/S Howard NO1 Revocable Trust
Title Organization

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

Trustee of D/S Howard NO1 Revocable Trust
Title Organization

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

Signature of Authorized Agent Shirley A. Howard Date 7/10/09

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 Howard Trust Identification No. _____