

**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: 94-8471
Date Received: 10/11/2011
Receipt No.: NO 28266 A

Amu

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
RICHARD GUTIERREZ	PO BOX 54	SILVERTON	ID	USA	83867
CONNIE L. GUTIERREZ	PO BOX 54	SILVERTON	ID	USA	83867

2. Date of Priority:

Date	Explanation
9/15/1902	STATE VOLUME PATENT (SEE ATTACHED) ISSUED 9.15.1902.

3. Source:

Source	Tributary	Type
UNNAMED STREAM	REVENUE CREEK	INSTREAM BEGINNING
UNNAMED STREAM	REVENUE CREEK	INSTREAM ENDING
REVENUE CREEK	S. FORK COEUR D ALENE RIVER	INSTREAM BEGINNING
REVEUNE CREEK	S. FORK COEUR D ALENE RIVER	INSTREAM ENDING

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
48N	04E	21		NE	NE	SHOSHONE
48N	04E	21		NW	NE	SHOSHONE
48N	04E	21		NE	NE	SHOSHONE
48N	04E	21		NW	NE	SHOSHONE

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

Water Use	Number Of Homes	Stock		Description
STOCKWATER	-	Type of Stock	Number of Stock	10 HORSES, GOATS.
		Mixed Stock	1 - 10	

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	48N	04E	21	NE	NE	SHOSHONE	-	-
STOCKWATER	48N	04E	21	NW	NE	SHOSHONE	-	-

9. Basis of Claim:

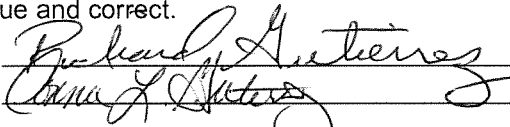
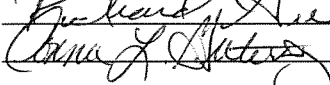
Basis
Beneficial Use

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: _____

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: 10-11-11
 Date: 10-11-11

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 _____

Title and Organization _____