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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: 95-9714
Date Received: 10/28/2011 *dm*
Receipt No.: 0028391

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DONALD M. ROBERTS	984 ROBERTS LN	BLANCHARD	ID	USA	99156
MARLENE M. ROBERTS	984 ROBERTS LN	BLANCHARD	ID	USA	99156

2. Date of Priority:

Date	Explanation
10/16/1962	

3. Source:

Source	Tributary	Type
UNNAMED STREAM	SINKS	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
54N	06W	12		SW	SE	BONNER

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

Water Use	Number Of Homes	Stock	Description
IRRIGATION	-	-	1 ACRE
IRRIGATION FROM STORAGE	-	-	1 ACRE.
IRRIGATION STORAGE	-	-	
RECREATION STORAGE	-	-	

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	4 / 1	11 / 1
IRRIGATION STORAGE	1 / 1	12 / 31

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RECREATION STORAGE	1 / 1	12 / 31
IRRIGATION FROM STORAGE	4 / 1	11 / 1

7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	0.020	0.00	0.0
IRRIGATION FROM STORAGE	0.000	3.00	0.0
IRRIGATION STORAGE	0.000	3.00	0.0
RECREATION STORAGE	0.000	23.00	0.0

Totals:

CFS	AF	KW
0.020	23.00	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	1
IRRIGATION FROM STORAGE	1

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
IRRIGATION FROM STORAGE	54N	06W	12	SW	SE	BONNER	-	1

9. Basis of Claim:

Basis	WaterRight
License	95-9714

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): Marlene M Roberts Date: 10-28-2011
 _____ 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