

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 95-4107

Date Received: 6/24/2010

Receipt No: *NO 25045 B*

Received By: *Am*

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s)

RAYTON FLOYD ULLRICH TRUST Phone: (208)689.9515

PO BOX 170

HARRISON ID USA 83833

2. Date of Priority: *12/31/1960 R.L.*
~~06/24/1960~~

3. Source: COEUR D ALENE LAKE Trib. to: SPOKANE RIVER

4. Point of Diversion:

Township Range Section 1/4 of 1/4 of 1/4 Lot County Type

48N 04W 15 SE SE 1 KOOTENAI

48N 04W 15 SE SE 1 KOOTENAI R.L.

5. Description of diverting works: *3/4 HP Elec Pump, 1 1/2" Irrigation Line*
3/4 Sprinklers, 5 max. at one time.

6. Water is used for the following purposes:
2 HP Sumersilbc For Domestic use.

Purpose	From	To	C.F.S.	(or) A.F.A
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DOMESTIC	01/01	12/31	0.04	
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7. Total Quantity Appropriated is: 0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	04W	15	SE	SE	DOMESTIC	

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Statutory Claim

16. 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: ONE

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.

For Organizations: I swear or affirm that I am Rayson Floyd Ullrich
of Trustee

Title Trustee

that I have signed the foregoing document in the space below as Rayson & Ullrich
of Rayson Floyd Ullrich Trust and that the statements contained in the

Organization

foregoing document are true and correct. _____

Notary Public

Residing at _____

My commission Expires _____