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DEC 14 2011  
IDWR / NORTHIN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE  
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN 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 91-2021

Date Received: 12-14-11

Receipt No: NO28420

Received By: Chud

NOTICE OF CLAIM  
TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) City of St. Maries Phone (208) 245-2577
- Mailing Address 602 College Ave. St. Maries ID 83861  
Street or Box City State
2. Date of Priority (Only one (1) per claim) 02/02/1960  
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water ( ) or Other (✓) (a) Rochat Creek  
 which is tributary to (b) St. Joe River

4. a. Location of Point of Diversion is: Township 46N, Range 01W, Section 3,  
SW, 1/4 of NE, 1/4 Govt. Lot \_\_\_\_\_, BM., County of Benewah

Parcel (PIN) no. \_\_\_\_\_

Additional points of diversion if any: None

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. Water is diverted at the Rochat Creek Dam through approximately

51,000 feet of 16 inch transmission main (upgraded from 12 inch in 2003/2004) to the water treatment plant(maximum design capacity of 2,285 gpm). Water from the treatment plant flows by gravity to the Capitol HillReservoir (500,000 gallons) and the system.

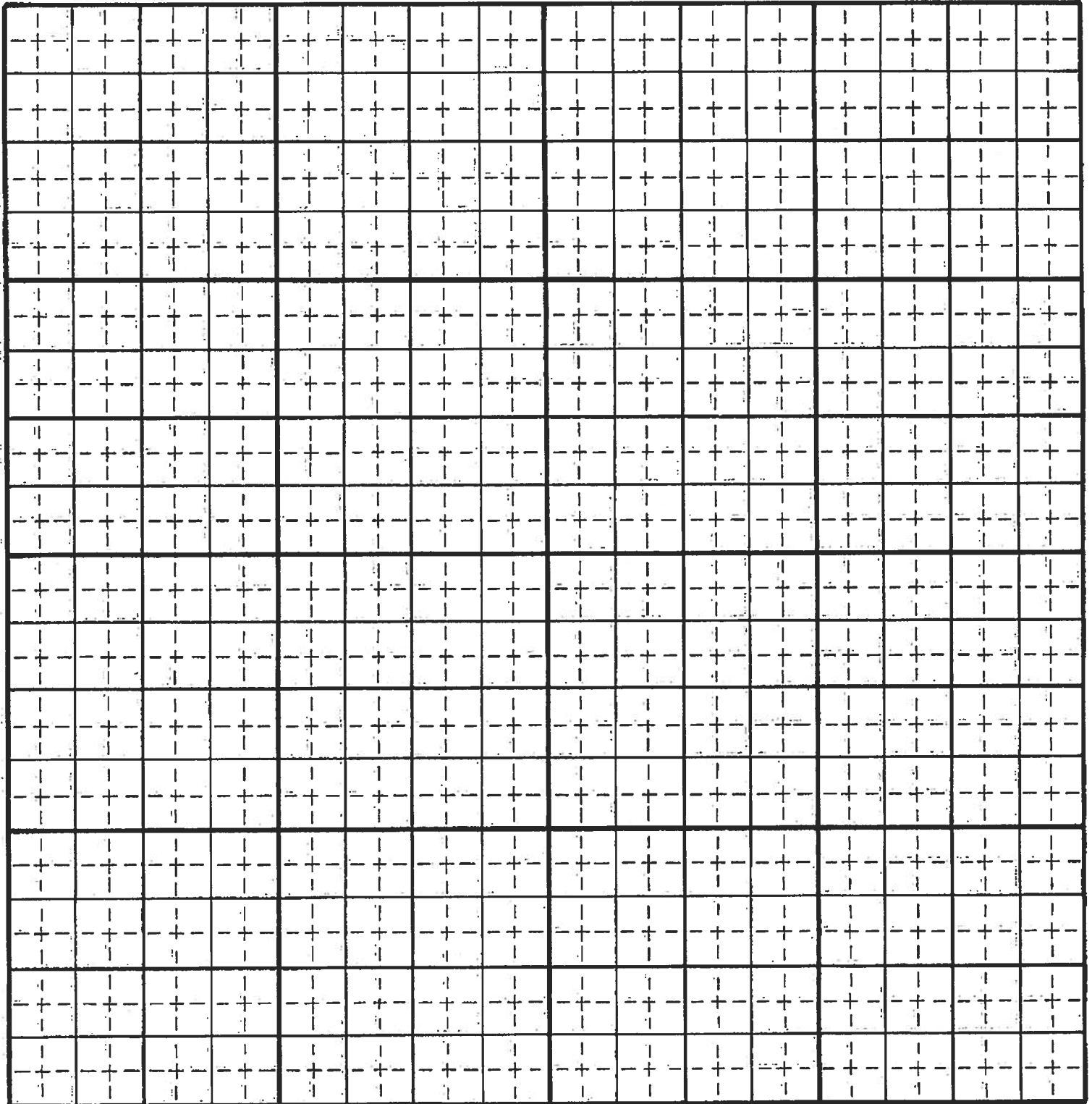
Last Name City of St. Maries Identification No. 91-2021

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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.

See the Map of Project, Attachment #4

Scale: 2 Inches equals 1 mile



Last Name City of St. Maries

Identification No. 91-2021

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 91-2021

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: 5

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: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

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

Public Works Director \_\_\_\_\_ of City of St. Maries \_\_\_\_\_,

Title

Organization

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

Public Works Director \_\_\_\_\_ of City of St. Maries \_\_\_\_\_,

Title

Organization

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

Signature of Authorized Agent [Signature] Date 12/12/11

Title and Organization Public Works Director

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 \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Last Name City of St. Maries Identification No. 91-2021