

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 49576

NUMBER:

Ident. 94-8771

Number:

Date

Received:

Receipt No.:

12-13-11
ED
NO 28808

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
STEPHEN F ALLEN	212 W IRONWOOD DR STE D # 320	COEUR D ALENE	ID	USA	83814-1403
GAIL J. WILSON	5107 N. ARGONNE LANE # 9	SPOKANE VALLEY	WA	USA	99212
DIANNE O'DONNELL	7801 W. STONEWOOD DR.	FRANKLIN	WI	USA	53132
TIMOTHY S. HAGGERTY	7801 W. STONEWOOD DR.	FRANKLIN	WI	USA	53132
DONEDA ALLEN	212 W IRONWOOD DR STE D # 320	COEUR D ALENE	ID	USA	83814-1403

2. Date of Priority:

Date	Explanation
7/1/1995	We purchased the property in July, 1997. The well was already drilled and working at that time. We bought it from Howard Leroy and we know that the well was being used by him for at least 2 years prior to our purchase.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
49N	04E	5		SE	NE	SHOSHONE

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

Water Use	Number Of	Stock	Description
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Homes

DOMESTIC *X* *4**ORA*

6. Season(s) of Use:

Water Use From Month/Day To Month/Day

DOMESTIC *4/1**10/31**1-1**ORA**12-31**ORA*

7. Quantity:

Water Use CFS AF KW

DOMESTIC *0.010* 0.00 0.0

Totals:

*0.04**ORA*

CFS AF KW

ORA *0.010* 0.00*0.04*

8. Place of Use:

Water Use Township Range Section QQ Q County Gov Lot Acreage

DOMESTIC 49N 04E 5 SE 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 *X* 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):

Stephen J. Allen
Donald Allen

Date:

12-2-11

Date:

12-2-11

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 _____

Please print name

Oliver O. Daniel 12/3/11

Anthony S. Haggerty 12/3/11

Gail Wilson 12/3/11