

**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 94-2122
Date Received: 12/15/11
Receipt No: NO 28893
Received By: R

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

Please type or print clearly

1. Name of Claimant (s) Hecla Limited Phone (208) 769.4100
Mailing Address 6500 N. Mineral Drive, Suite 200 Coeur d'Alene ID ZIP 83815-9408
Street or Box City State
2. Date of Priority (Only one (1) per claim) 05-23-1953
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (☒) (a) Little N Fork of the S Fork Cd'A River
which is tributary to (b) S Fork Coeur d'Alene River

4. a. Location of Point of Diversion is: Township 48N, Range 6E, Section 32,
NW, 1/4 of NE, 1/4 Govt. Lot _____, BM., County of Shoshone

Parcel (PIN) no. 48N06E-32-0500

Additional points of diversion if any: Seep development in NW1/4 SW1/4 S32 T48N R6E; 48N06E-32-1350

If available, GPS Coordinates N/A

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. _____

Irrigation diversion controlled by head-gate in dam empties into box flume that empties into a ditch.

Domestic diversion from developed spring collection system to residence.

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For domestic purposes from 01-01 to 12-31 amount 0.6 or 434.38

For irrigation purposes from 04-01 to 10-31 amount 0.6 or 434.38

For purposes from to amount or

For purposes from to amount or

7. Total quantity claimed (a) 0.6 (cfs) and/or (b) 434.38 (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) Domestic for one household; irrigation during irrigation season

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
48N	6E	32							15	15									30.0

Parcel (PIN) no(s). 48N06E-32-1300; 48N06E-32-1350

Total number of acres irrigated 30.0

10. In which county (ies) are lands listed above as place of use located? Shoshone

11. Do you own the property listed above as place of use? Yes (✓) No ()

If your answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

or None (✓)

13. Remarks:

Last Name Hecla Limited Identification No.

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 94-2122

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: one (map)

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

Vice President _____ of Hecla Limited _____,

Title

Organization

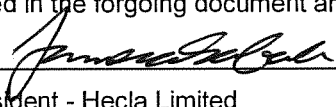
that I have signed the foregoing document in the space below as

Vice President _____ of Hecla Limited _____,

Title

Organization

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

Signature of Authorized Agent  Date 12/17/11

Title and Organization Vice President - Hecla Limited

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 Hecla Limited Identification No. _____