

Form No. 42-1409-2 (Internet 11/08)

Rec'd 11/21/11

11/21

**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 _____

Date Received: 11-23-11Receipt No: N028630BReceived By: aw**RECEIVED**

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

NOV 23 2011

IDWR/NORTHERN

1. Name of Claimant(s) Elk Valley Farm Phone 208 682-4343

Mailing Address 1415 Oakdale Blvd, Oakdale ID Zip 83850
Street or Box City State

2. Date of Priority: (Only one per claim) 5/20/2002
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other () (a) well
which is tributary to (b) _____

4. Parcel 1: East half of the Southwest Quarter, Section 3, Township 48 North,
Range 1 East Boise Meridian, Shoshone County, State of Idaho,
except any portion of Kootenai County, State of Idaho

Additional points of diversion if any: _____

If available, GPS coordinates: _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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.

285 FT

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from 1/1/11 to 12/31/11 amount around 13,000 g/day
Month/Day Month/Day cfs () or AFY ()

For Livestock purposes from 1/1/11 to 12/31/11 amount around 13,000 g/day

7. Total Quantity claimed around 13,000 g/day cfs () or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 Horse Held / 50-300 Head Elk

9. Location of Place of Use is: Township _____, Range _____, Section _____,
 _____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
 If different than shown in Item 4

for (Check One) Domestic (X) Stock (X) Domestic and Stock ()

Additional places of use, if any _____

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

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

If the 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.

All surface water, livestock / well or None ()

13. Remarks:

14. Basis of Claim (Check One) Beneficial Use (X) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

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: _____

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) Charles R. Warner Date: 11/15/11

Date: _____

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

President of Elk Valley Farms,
 Title Organization

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

President of Elk Valley Farms,
 Title Organization

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

Signature of Authorized Agent Charles R. Warner Date 11/15/11

Title and Organization Pres. Elk Valley Farms

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 _____

Address _____

Date _____

Last Name _____ Identification No. _____