

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

**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: 11-23-11

Receipt No: NO 281630H

Received By: ur

RECEIVED

NOV 23 2011

IDWR/NORTHERN

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) Elk Valley Farm Phone 208 682-4343Mailing Address 1415 Cataldo Gulch Rd. Zip 83810
Street or Box Cataldo, Idaho State2. Date of Priority: (Only one per claim) 3/20/2002
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water () or Other () (a)which is tributary to (b) Cataldo Gulch Creek / River

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

Parcel 2: Southeast Quarter of Section 3, Township 48 North, Range 1 East, Boise
Meridian, Shoshone County, State of Idaho

5. Parcel 3: The North 825 feet of the East 660 feet of the Northeast 1/4 of the
Northwest 1/4 and the North 825 feet of the Northwest 1/4 of the
Northeast 1/4, in Section 10, Township 48 North, Range 1 East, B.M.
Shoshone County, Idaho

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

For Domestic purposes from 5/1/11 to 12/31/11 amount 6/dogFor Livestock purposes from 1/1/11 to 12/31/11 amount 25-300 Head Elk

7. Total Quantity claimed _____ 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 House hold 25-300 Head Elk

9. Location of Place of Use is: Township 48 N, Range 1, Section 3,
 _____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
 If different than shown in Item 4

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

Additional places of use, if any _____

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 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.

Openly surface water / well or None ()

13. Remarks: Catfold, Gulch, Livestock

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 _____

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 A. Wanner Date: 11/15/11

Date: _____

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

President of Elk Valley Farm,
 Title Organization

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

President of Elk Valley Farm,
 Title Organization

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

Signature of Authorized Agent Charles A. Wanner Date: 11/15/11

Title and Organization Pres Elk Valley Farm

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. _____