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AUG 02 2012

DEPARTMENT OF
WATER RESOURCES

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: 95-8735
Date Received: 06/06/2010
Receipt No.: T091116
N029319

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s):

Name	Address	City	State	Postal Code
AARON LYBARGER	5562 E WILMA RD	COEUR D'ALENE	ID	83814
EAGLE CREST WATER USERS ASSN INC	720 W SAXON DR	SPOKANE	WA	99203

SAXON

2. Date of Priority:

Date	Explanation
1/14/1992	This is the date at which the permit to appropriate water was made. The permit was issued 14th April 1992.

3. Source:

Source	Tributary	Type
COEUR D ALENE LAKE	SPOKANE RIVER	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
50N	03W	33	3	NE	SW	KOOTENAI

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

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	Domestic use for 4 homes.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use CFS AF KW

DOMESTIC 0.110

Totals:

CFS AF KW

0.110

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
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DOMESTIC	50N	03W	33	NE	SW	KOOTENAI	3	-
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DOMESTIC	50N	03W	33	NW	SE	KOOTENAI	3	-
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9. Basis of Claim:

Basis

Permit

10. Remarks

This water permit is for the benefit of the patrons of the Eagle Crest Water Users Association, Inc. and the claimant of this water permit should be listed as the Eagle Crest Water Users Association. By signing below, Aaron Lybarger agrees that the only owner listed on the claim should be Eagle Crest Water Users Association, Inc.

11. 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 ___ 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): Aaron D. Lybarger Date: 7/28/12
Date: _____

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

Secretary-Treasurer of Eagle Crest Water Users Association, Inc.
Title Organization

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

Secretary-Treasurer of Eagle Crest Water Users Association, Inc.
Title Organization

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

Signature of Authorized Agent Gloria Lekander Date July 29, 2012
Title and Organization Secretary-Treasurer, Eagle Crest Water Users Association, Inc.

* Please print name below:

* GLORIA LEKANDER

Please Note ---- my mailing address--

720 W Saxon Dr.
Spokane, WA 99203