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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

RECEIVED

AUG 09 2012

IDWR/NORTHERN

Ident. Number 95-16432

Date Received: 8-9-12

Receipt No: N029438

Received By: 

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

PORT STANHOPE INVESTMENTS LLC
1795 PORT STANHOPE CIRCLE
NEWPORT BEACH CA USA 92660

Phone: (949)717-6771

2. Date of Priority: 11/30/2006

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
54N	03W	33	NE SW		BONNER	

5. Description of diverting works:

Tag # D0046369

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	01/01	12/31	0.03	1.2

7. Total Quantity Appropriated is:

0.03 C.F.S. and/or 1.2 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
54N	03W	33	NE SW		DOMESTIC	

11. Place of use in counties: BONNER

12. Do you own the property listed above as place of use? No

13. Other Water Rights Used:

14. Remarks:

Domestic use is for 1 home.
The quantity of water under this right shall not exceed 13,000 gallons per day.
Point of diversion is located within Lot 1, Bright Sky Subdivision.
Place of use is located within Lot 1, Bright Sky Subdivision.

15. Basis of Claim: License

16. 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): _____ Date: _____

_____ Date: _____

For Organizations:

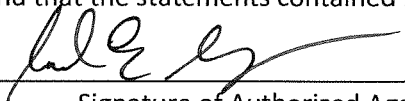
I do solemnly swear or affirm under penalty of perjury that I am

Managing Member of Port Stanhope Investments, LLC
Title Organization

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

Managing Member of Port Stanhope Investments, LLC
Title Organization

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


Signature of Authorized Agent

Managing Member, Port Stanhope Investments, LLC
Title and Organization

8/5/12
Date