

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: ~~95-12330~~

Date Received: ~~5/10/2010~~

Receipt No: T090787

Received By:

95-8621
6-6-1989

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

THOMAS J & GAIL D
STEVENSON LLC
1612 E 65TH AVE
SPOKANE WA 99223

2. Date of Priority: 4/30/1980

3. Source: COEUR D ALENE LAKE Tributary to: SPOKANE RIVER

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
48N	04W	20	SW NE	4	KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From</u>	<u>To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1 /1	12/31	0.03 .04	0

7. Total Quantity Appropriated is: 0.03 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses:

<u>Number of Homes:</u>	<u>1</u>	<u>Water Use</u>	<u>Type Of Stock</u>	<u>Number Of Stock</u>
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9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
48N	04W	20	SW NE	4	DOMESTIC	

Section Acres

Total Acres

10. Place of use in counties: KOOTENAI

11. Do you own the property listed above as place of use? Yes

12. Other Water Rights Used:

13. Remarks:

Priority date description:

95-12330

6/6/2012

RECEIVED
DEC 11 2012
IDWR/NORTHERN

Description of use: Water Use
DOMESTIC

Description
Household and lawn

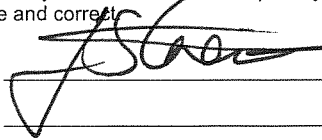
14. Basis of Claim: Beneficial Use

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 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.

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):



Date:

12-8-12

Date:

12-8-12

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

Manager Mark
Title

of Thomas J + Gail O Stearns LLC
Organization

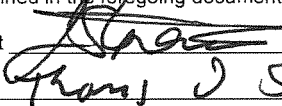
That I have signed the foregoing document in the space below as

Manager Mark
Title

of Thomas J + Gail O Stearns LLC
Organization

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

Signature of Authorized Agent



Date:

12-8-12

Title and Organization

Thomas J Stearns

Please print name