

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 95-7680
Date Received: 01/28/2010
Receipt No: N023470
Received By: CM

AMENDED
NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)
CDA LODGE 1254 BPOE Phone: (208) 772-4049
1170 W PRAIRIE AVE
COEUR D'ALENE ID USA 83815
2. Date of Priority: 11/03/1976
3. Source: GROUND WATER Trib. to:
4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
51N	04W	26	NE NW	KOOTENAI	
5. Description of diverting works:
6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	03/15	11/15	0.03	4.5
DOMESTIC	01/01	12/31	0.2	24
7. Total Quantity Appropriated is:
0.23 C.F.S. and/or 28.5 A.F.A.
8. Total consumptive use:
9. Non-irrigation uses:
Number of other uses: 40
10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
51N	04W	26	NE NW	DOMESTIC	
			NE NW	IRRIGATION	1.5
				Section Acres	1.5
				Total Acres	1.5
11. Place of use in counties: KOOTENAI

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

13. Other Water Rights Used:

14. Remarks:

Right includes accomplished change in purpose of use pursuant to Section 42-1425, Idaho Code.

Domestic use is for 40 RV sites. Irrigation of lawn, garden and landscaping associated with the home is authorized under the irrigation component of this right.

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 _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet

Number of attachments: _____

For Organizations:

I do solemnly swear or affirm that I am

_____ of _____,
Title Organization
that I have signed the foregoing document in the space below as

_____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

Date

