

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: 94-7226

Date Received: 5/24/2013

Received By: *NORRIS*

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

BISSELL FAMILY TRUST Phone:(208)689-3356
5305 E OGARA RD
HARRISON ID 83833
JOYCE BISSELL Phone:(208)689-3356
5305 E OGARA RD
HARRISON ID 83833

2. Date of Priority: 8/16/1982

3. Source: SPRING Tributary to: COEUR D'ALENE LAKE

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>
47N	03W	17	SE NW	2	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>
IRRIGATION	3/15 11/15	0.04	15
IRRIGATION FROM STORAGE	3/15 11/15		0.9
IRRIGATION STORAGE	1/01 12/31		0.9

7. Total Quantity Appropriated is: 0.04 C.F.S. and/or 15 A.F.A

8. Non-irrigation uses:

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>
47N	03W	17	SE NW	2	IRRIGATION	5
					Section Acres	5
					Total Acres	5

10. Place of use in counties: KOOTENAI

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

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use: Water Use Description
IRRIGATION
IRRIGATION FROM STORAGE
IRRIGATION STORAGE

14. Basis of Claim: License

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): Angie B. Smith Trusted Date: 5-24-13

Date: _____

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

Title of _____
Organization

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

Title of _____
Organization

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

Signature of Authorized Agent _____ Date: _____

Title and Organization _____

Please print name