

**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 49576
NUMBER:
Ident. Number: 93-7274
Date Received:
Receipt No.:**

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
WANDA GATES	PO BOX 672549	CHUGIAK	AK	USA	99567

2. Date of Priority:

Date	Explanation
5/1/1954	I HAVE LIVED IN OR AROUND TENSED SINCE BIRTH AND I REMEMBER PLAYING IN THIS PUMP HOUSE IN 1954, AS A KID BECAUSE IT WAS SO COOL IN THERE. THAT IS THE FIRST TIME I HAVE ANY THOUGHTS OF IT ALTHOUGH THE HOUSES WHERE THE WATER WAS USED IN WAS OLD THEN AS WAS THE PUMP HOUSE. I'M PRETTY SURE THEY WOULDN'T HAVE DRILLED A WELL BEFORE SPRING, SO I GUESSED MAY 1st. I ASKED MY MOTHER, UNCLE, AND COUSINS (WHO ALL STILL LIVE IN TENSED) AND THEY COULDN'T REMEMBER WHEN IT WAS PUT IN, ALTHOUGH HARRY JOHNSON LIVED THERE AS DID HERMAN FERHS AND THEY USED THAT WELL.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
44N	05W	14		NE	NE	BENEWAH

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

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	HOUSEHOLD AND TREE WATERING

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	0.030	0.00	0.0

Totals:

CFS	AF	KW
0.030	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	44N	05W	14	NE	NE	BENEWAH	-	-
DOMESTIC	44N	05W	14	NE	NE	BENEWAH	-	-
DOMESTIC	44N	05W	14	NE	NE	BENEWAH	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. 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): Wanda Gates Date: 6-5-2011

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury 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 _____ Date _____

Title and Organization _____

Please print name

SCANNED
JUN 13 2011