

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

ID Number: 92-10898

Date Received: 6-21-13

Receipt No: NO29966 D

Amount: \$57⁰⁰ By: Chad

RECEIVED

JUN 21 2013

IDWR / NORTH

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of claimant(s) KLAVEANO RANCHES INC Phone 509-843-3822
Mailing address 1511 LOWER DEADMAN RD POMEROY WA ZIP 99347
Street or Box City State
2. Date of priority (only one (1) per claim) 2-1-1904
Month Day Year (yyyy)
3. Source of water supply (check one) Ground Water () or Other (x) (a) SEE ATTACHED
which is tributary to (b) _____
4. a. Location of point of diversion is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, or Govt. Lot _____, B.M., County of SHOSHONE
Parcel (PIN) no. _____
Additional points of diversion if any: SEE ATTACHED FOR 26 INSTREAM POD'S
If available, GPS coordinates: _____
- b. If instream flow, beginning point of claimed instream flow is: Township _____, Range _____,
Section _____, _____ 1/4 of _____ 1/4, or Govt. Lot _____, B.M., County of _____
ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4 or
Govt. Lot _____, B.M., County of _____
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, etc.),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well.
INSTREAM STOCKWATER FOR PROPERTY AND 250 HEAD OF MIXED STOCK

SCANNED
JUN 24 2013

6. Water is claimed for the following purposes:

(both dates are inclusive mm-dd)

(cfs)

(acre-feet)

For INSTREAM STOCKWATER purposes from 1/1 to 12/31 amount 0.07 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.07 (cfs) and/or (b) _____ (acre-feet)

8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served; Stockwater: type and number of livestock, etc.): INSTREAM STOCKWATER FOR 250 HEAD OF STOCK

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (e.g. D for domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
42N	01E	24	X		X	X									X				
42N	01E	13													X		X	X	
42N	02E	19					X	LT1											
42N	02E	18		X	X		X	LT1	LT2	X		LT3	LT4	X					
42N	02E	7												X			X		

Parcel (PIN) no(s). SEE ATTACHED MAP

Total number of acres irrigated _____

10. In which county(ies) are lands listed above as place of use located? SHOSHONE

11. Do you own the property listed above as place of use? Yes (x) No ()

If your answer is no, describe in remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ()

13. Remarks:

INSTREAM STOCKWATER FOR 250 HEAD OF MIXED STOCK BASED ON THE LATEST HOMESTEAD

FOR THE ENTIRE PROPERTY IN 2/1/1904

Last name KLAVEANO RANCHES

Identification no. _____

14. Basis of claim (check one) Beneficial Use (x) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable, provide IDWR water right number _____

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 notices 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:

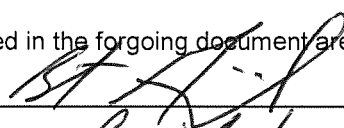
I do solemnly swear or affirm under penalty of perjury that I am

_____ of KLAVEANO RANCHES INC
Title Organization

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

_____ of KLAVEANO RANCHES INC
Title Organization

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

Signature of authorized agent  Date 6/21/13

Title and organization Vice - President

16. Notice of appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Last name KLAVEANO RANCHES Identification no. _____