

**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: 94-9211
Date Received: 7-1-13
Receipt No.: NO 29982

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
SHAWN T MONTEE	PO BOX 2028	COEUR D ALENE	ID	USA	83816

2. Date of Priority:

Date	Explanation
7/23/1998	1993 ARCMAP AND GOOGLE EARTH IMAGES SHOW BUILDINGS AT SITE OF CLAIMED DOMESTIC AND STOCKWATER PLACE OF USE. WELL D0005153 COMPLETED 7.23.1998 AND PLACED INTO IMMEDIATE SERVICE.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
49N	02E	4	12	SW	SW	SHOSHONE

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

Water Use	Number Of Homes	Stock	Description				
DOMESTIC	1	-	WELL D0005153 COMPLETED 7.23.1998 FOR PRIOR OWNER.				
STOCKWATER	-	<table><tr><th>Type of Stock</th><th>Number of Stock</th></tr><tr><td>Mixed Stock</td><td>26 - 50</td></tr></table>	Type of Stock	Number of Stock	Mixed Stock	26 - 50	HORSES, BEEF CATTLE.
Type of Stock	Number of Stock						
Mixed Stock	26 - 50						

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31
STOCKWATER	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.040	0.00	0.0
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.060	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	49N	02E	4	SW	SW	SHOSHONE	12	-
STOCKWATER	49N	02E	4	SW	SW	SHOSHONE	12	-

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: 1

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: 6/20/2013
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

Print Claim Stub

N029982

Thank you for submitting your claim to IDWR.

**If paying in person, please print this page and bring it with you.
If paying by mail, make sure to enclose a copy of this page with your payment.**

If you experience printing problems or do not have a printer, copy this information and include it with your payment.

Please type or write clearly. Please include the claim number shown below on any supporting documents you submit to IDWR.

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Claim Number:	94-9211
Claim Fee:	\$25.00
Claimant(s):	SHAWN T MONTEE
	PO BOX 2028
	COEUR D ALENE , ID
	83816
Claimed Purpose(s) of Use:	DOMESTIC
	STOCKWATER

[Go to View History page](#)[Logout](#)**Office address and phone number:**

Idaho Department of Water Resources
7600 Mineral Dr. Suite 100
Coeur d'Alene, ID 83815
(208) 762-2800