

**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**
RECEIVED

CIVIL CASE NUMBER: 49576

Ident. Number 91-4001

Date Received: 11-1-2011

Receipt No: NO28420 A

Received By: HA

NOV 01 2011

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

IDWR / NORTH

Please type or print clearly

1. Name of Claimant (s) City of St. Maries Phone (208) 245-2577

Mailing Address 602 College Ave. St. Maries ID 83861
Street or Box City State

2. Date of Priority (Only one (1) per claim) 11/11/1938 (refer to Remark #3)
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (☒) (a) Rochat Creek
which is tributary to (b) St. Joe River

4. a. Location of Point of Diversion is: Township 46N, Range 01W, Section 3,
SW, 1/4 of NE, 1/4 Govt. Lot _____, BM., County of Benewah

Parcel (PIN) no. _____

Additional points of diversion if any: None

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., 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. Water is diverted at the Rochat Creek Dam through approximately

51,000 feet of 16 inch transmission main (upgraded from 12 inch in 2003/2004) to the water treatment plant

(maximum design capacity of 2,285 gpm). Water from the treatment plant flows by gravity to the Capitol Hill

Reservoir (500,000 gallons) and the system.

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6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Municipal purposes from 01/01 to 12/31 amount 3.71 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 3.71 (refer to Remark #4) (cfs) and/or (b) _____ (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) Municipal: 1,569 connections

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 (example: 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	
			See Place of Use Map, Attachment #1 See Place of Use List, Attachment #2																

Parcel (PIN) no(s). _____ Total number of acres irrigated NA

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

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

See Attachment #3 or None ()

13. Remarks: 1. The City of St. Maries is a public utility that provides water to the customers within their service area.

2. This claim is being filed in lieu of separate claims to water right numbers 91-2021 and 91-4001.

3. The priority date was established as the date that the Rochat Creek Dam (POD) was completed, based on the Proof of Completion of Works form (see Attachment #5) submitted to IDWR by the City.

4. The quantity claimed is based on the diversion capacity of the system as proven during the field examination for water right number 91-2021 (as discussed in a letter to IDWR from Chronic & Associates dated September 20, 1973 (see Attachment #6).

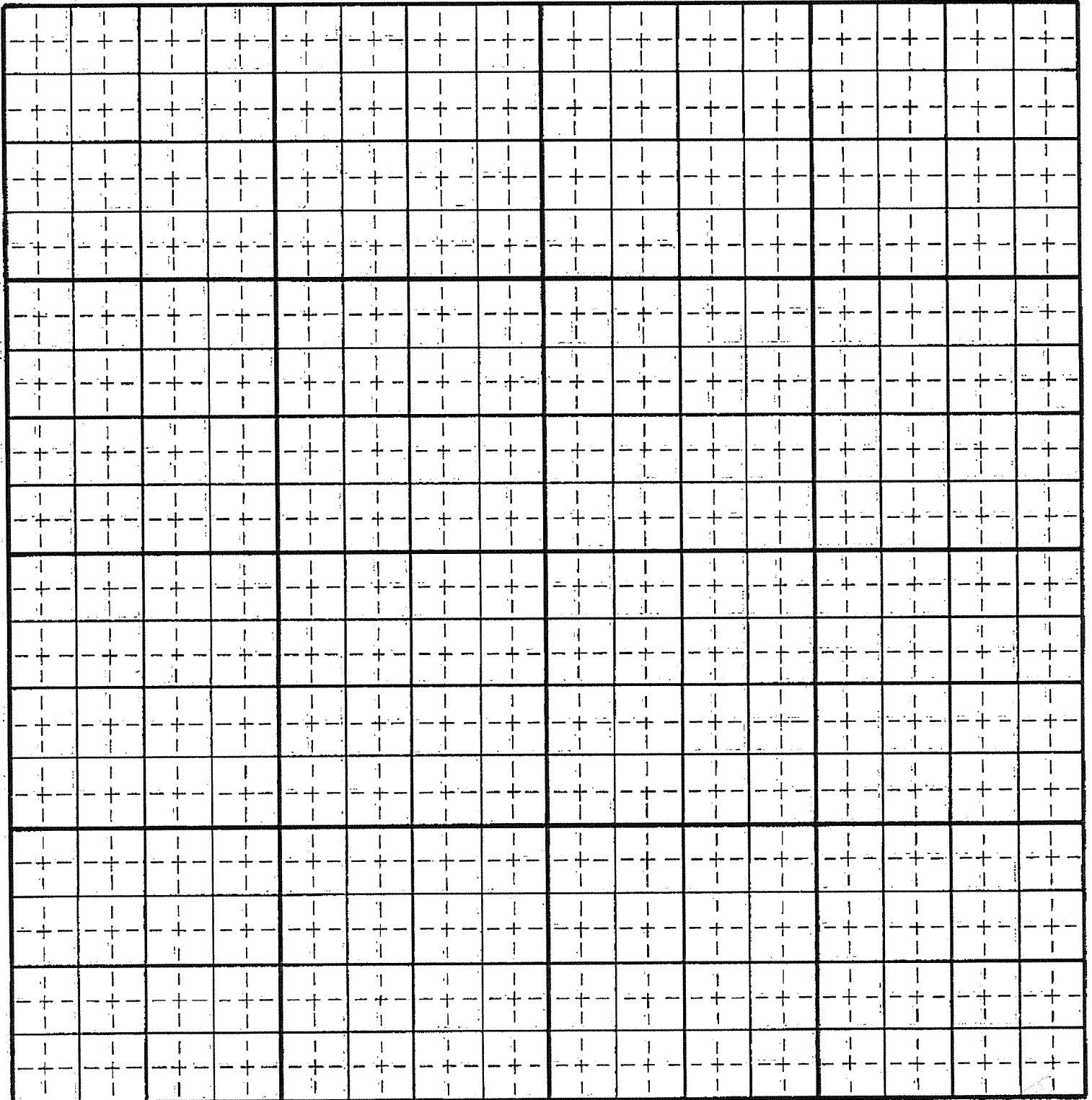
Last Name City of St. Maries Identification No. _____

COANED
10-1-2011

Map of Project: Attach aerial photograph or topographic map showing clearly the point of diversion, place of use, section number, township, and range number, unless unavailable. Otherwise sketch the elements above on the grid below.

See the Map of Project, Attachment #4

Scale: 2 Inches equals 1 mile



Last Name _____ City of St. Maries

Identification No. _____

CO-1201

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice (☐) License (☐) Permit (☐) Decree (☐)

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 91-2021 & 91-4001 Refer to Remark #2

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 (☐) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 6

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

Public Works Director _____ of City of St. Maries _____,
Title Organization

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

Public Works Director _____ of City of St. Maries _____,
Title Organization

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

Signature of Authorized Agent Mark J. Reynolds _____ Date 10-31-11 _____

Title and Organization Public Works Director _____

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 City of St. Maries Identification No _____

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10-31-11