

ORIGINAL

Form No. 42-1409-2 (Internet 12/08)

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IDWR / NORTH

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 94-7023

Date Received: 12/9/11

Receipt No: ~~15288~~ N028779

Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s) City of Smelterville Phone (208) 786-3351

Mailing Address Box 200 Smelterville ID 83868
Street or Box City State Zip

2. Date of Priority: (Only one per claim) May 7, 1972
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (✓) or Other () (a) _____
which is tributary to (b) the South Fork of the Coeur d'Alene River

4. Location of Point of Diversion is: Township 49N, Range 2E, Section 35,
_____ 1/4 of _____ 1/4, or Govt. Lot _____ BM. County of Shoshone;

Parcel (PIN) no. _____

Additional points of diversion if any: None

If available, GPS coordinates: _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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.
well for irrigating Smelterville City Park

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Irrigation purposes from 3-15 to 11-15 amount 13000 less cfs(✓) or AFY()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.02 cfs (✓) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) irrigation only for City Park of 1.013 acres

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9. Location of Place of Use is: Township 49N, Range 2E, Section 35,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
If different than shown in Item 4

for (Check One) **Domestic** () **Stock** () **Domestic and Stock** ()

Additional places of use, if any Irrigation only

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 (✓) No ()

If the 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:

Enclosed please find the documents listed on Exhibit "A" attached hereto

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 94-7023

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: 13

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) [Signature] Date: 12/6/11

Tom Benson Date: _____

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

Mayor Title of City of Smelterville 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 _____

16. Notice of Appearance:

Notice is hereby given that I, Hollis J. Anderson, 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 Hollis J. Anderson Date 12/8/11

Address 416 Sixth Street, Wallace, Idaho, 83873

Last Name City of Smelterville Identification No. _____

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