

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 94-8523

Date Received: 10-21-11

Receipt No: N028331e

Received By: N. Seading

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) LARRY & JACKIE PICKRELL
GARY & JOAN RICHARDS Phone (208) 661-8699

Mailing Address P.O. Box 686 PINCHURST, ID. Zip 83850
Street or Box City State

2. Date of Priority: (Only one per claim) 8 AUG/15/2003
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____

which is tributary to (b) DOUGLAS CREEK

4. Location of Point of Diversion is: Township 47 NORTH Range 2 EAST Section 1/2 OF THE GARDEN
NORTHEASTERLY
LOPE CLAIM
M.S. 2319 1/4 of _____ 1/4, or Govt. Lot _____ BM. County of SHOSHONE CO.;

Parcel (PIN) no. RP47ND2E023800 A

Additional points of diversion if any: _____

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. IN 2002 ONE WELL DUG BY PREVIOUS OWNER; WELL IS 8' to 10' DEEP; A SMALL SUBMERSIBLE PUMP IS USED TO EXTRACT WATER. A GENERATOR IS USED TO RUN PUMP AS THERE IS NO ELECTRICITY WITH 2 1/2 MILES OF PROPERTY. WE PURCHASED PROPERTY IN 2003 & NO CHANGES MADE.

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

For TWO RV TRAILERS purposes from JUNE to AUG amount 0.04
DOMESTIC USE cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.04 cfs () or AFY ()

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

Stockwater and Number of livestock) DOMESTIC - TWO HOUSEHOLDS LIVING IN

TWO RV TRAILERS - WATER PUMPED FROM WELL INTO RV'S
FOR DRINKING, SHOWER & KITCHEN - NO LIVESTOCK

OCT 7 4 2011

9. Location of Place of Use is: Township 47 NORTH Range 2 EAST Section NORTHEASTERLY 1/2 OF THE GORDON
LODE CLAIM
M.S. 2319 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. SAME
If different than shown in Item 4

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

Additional places of use, if any _____

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

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

13. Remarks: _____

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: 0

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)

Larry C. Pickrell

Date: 10/14/2011

Justin L. Pickrell

Date: 10/14/2011

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 _____

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 _____ Identification No. _____

COANNED
OCT 24 2011