Form No.42-1409-1 (Internet 12/08)

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 94-8901
Date Received: 12/7/11
Receipt No: N028747 0
Received By: Sheadley

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) JB-EFA-BNRR LLC Phone (509-994-2557
   Mailing Address PO Box 327 (Street or Box) Kingston (City) ID (State) ZIP 83839
2. Date of Priority (Only one (1) per claim) May 13, 1913 (Month Day Year (YYYY))
3. Source of water supply (Check one) Ground Water ( ) or Other ( ) (a) Bear Creek
   which is tributary to (b) SF Coeur d'Alene River
4. a. Location of Point of Diversion is: Township _____, Range _____, Section _____,
   _____, 1/4 of _____, 1/4 Govt. Lot _____, BM., County of _____
   Parcel (PIN) no. _____
   Additional points of diversion if any: _____
   If available, GPS Coordinates _____

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

Township 49N, Range 2E, Section 28, NE, 1/4 of SW, 1/4
Govt. Lot ____, BM., County of Shoshone

ending point is: Township 49N, Range 2E, Section 28, NE, 1/4 of SW, 1/4
Govt. Lot ____, BM., County of Shoshone

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. _____

SCANNED
DEC - 7 2011

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD) (cfs) (acre feet)

For Stock water purposes from 1/1 to 12/31 amount 0.02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.02 (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.) Stock water 50 mixed

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	
49N	3E	28								S	S								

Parcel (PIN) no(s). [redacted]ER49N03E284800 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 (—) 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: _____

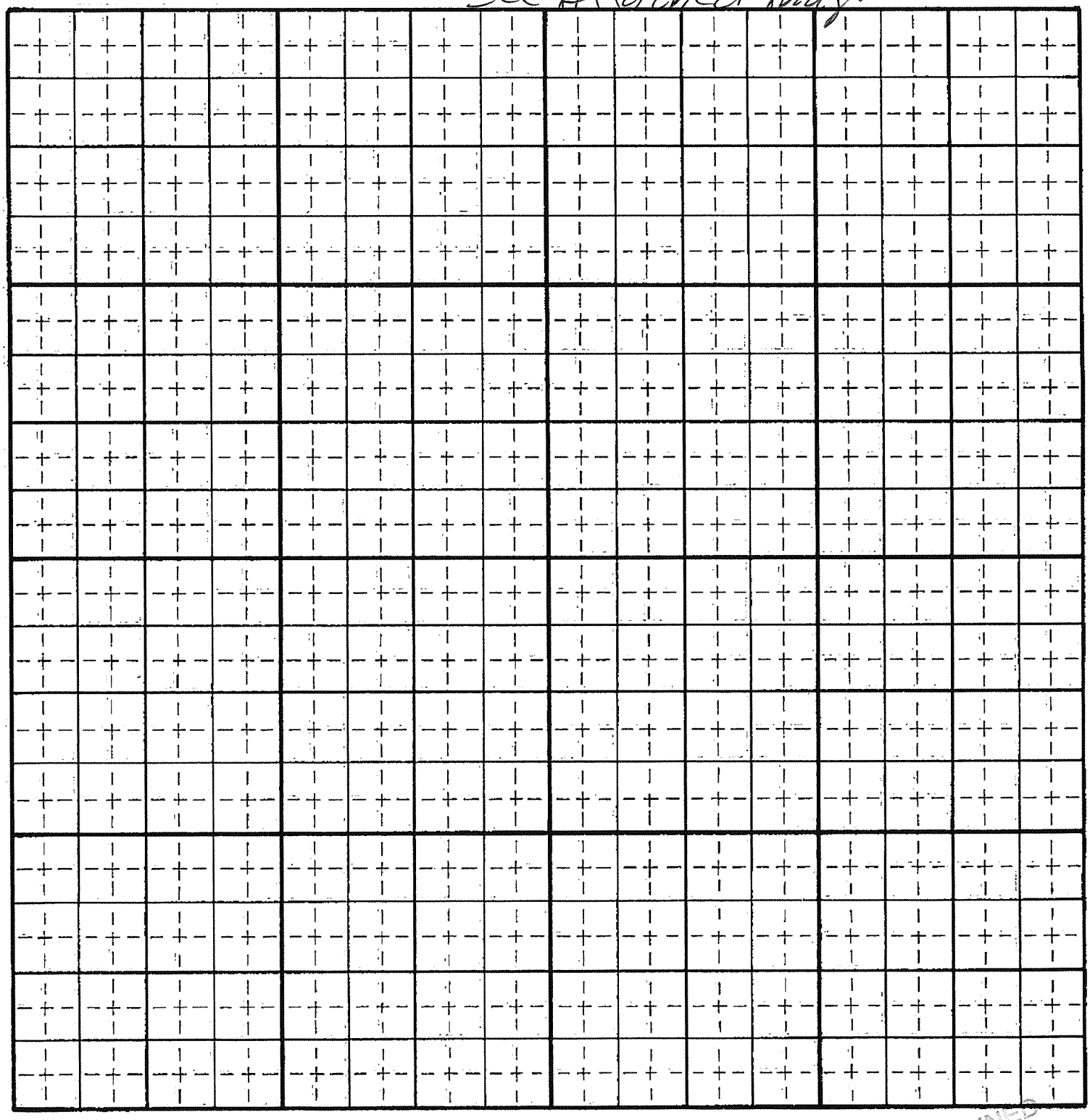
Last Name _____ Identification No. _____

SCANNED DEC - 7 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.

Scale: 2 Inches equals 1 mile

See Attached map ✓



Last Name _____ Identification No. _____

SCANNED
DEC - 7 2011

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 _____

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: 3

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

Manager (Title) of JB-EFA-BNRRLLC (Organization),

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

Manager (Title) of JB EFA BNRRLLC (Organization),

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

Signature of Authorized Agent _____ Date 12/7/2011

Title and Organization Manager JB EFA BNRRLLC.

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. _____

SCANNED DEC - 7 2011