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

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE ^{IDWR/NORTH}
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 95-397

Date Received: 5-24-09

Receipt No: NO20700

Received By: cm

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Bryan E Fuhs Phone (509) 443 7188

Mailing Address 1603 E Westminster Lane Spokane WA ZIP 99223
Street or Box City State

2. Date of Priority (Only one (1) per claim) 06/01/1956
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (✓) (a) Hayden Lake
which is tributary to (b) Sinks

4. a. Location of Point of Diversion is: Township 51 N, Range 03 W, Section NESE,
1/4 of _____, 1/4 Govt. Lot _____, BM., County of _____

Parcel (PIN) no. 0J306001002A

Additional points of diversion if any: _____

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. _____

In lake water pump system with a 3/4 hp well pump

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6. Water is claimed for the following purposes:

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

For Domestic purposes from 04/01 to 12/31 amount 0.02 or 0.47

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 (cfs) and/or (b) 0.47 AFA (acre feet)

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

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	
51N	03W	4				Dlt5													

Parcel (PIN) no(s) 0J306001002A Total number of acres irrigated

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

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 ()

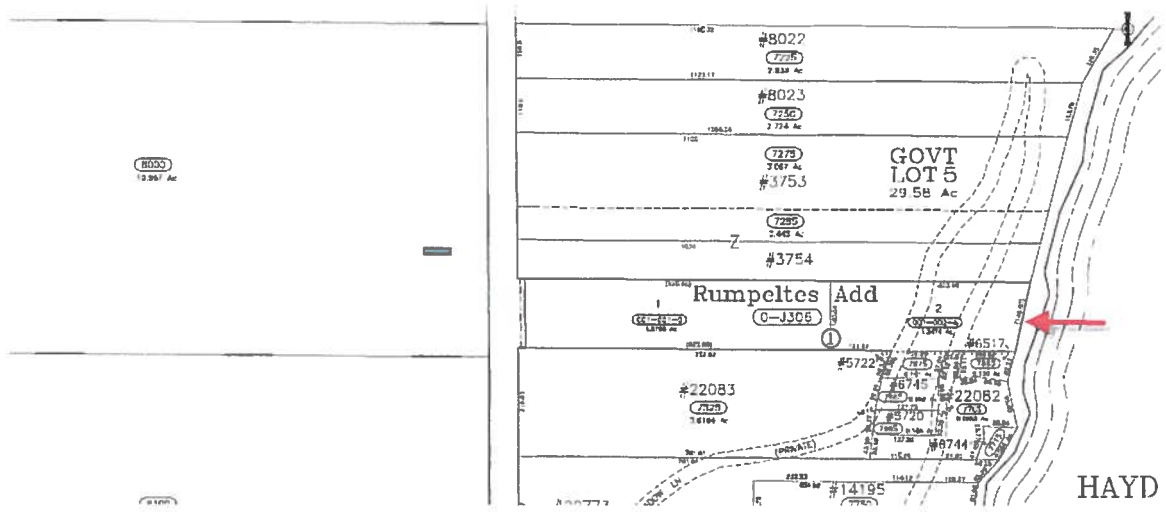
13. Remarks: The address of the property is 6573 E Deep Shadow Lane, Hayden Lake, ID. This property was previously owned by Otto White, sold to Dan Rumpeltes, and then bought by me. The Property has been subdivided and the portion we bought has the pre-existing structure which has the water pumped from the lake to the home. The subdivision is now named Rumpeltes Addition 001-002-A. The water right associated with this structure is 95-397.

Last Name Identification No.

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SE 1/4 Sec.4 Twp. 51 N. R.3 W.B.M.

51N03W-04



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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 95-397

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: _____

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) Bryan E. Fuls Date: 5/18/2009
Valerie A. Fuls Date: 5/20/09

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. _____

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