

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 95-7612Date Received: 1-8-10Receipt No: N023273Received By: em

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

RECEIVED
JAN - 8 2010

Please type or print clearly

IDWR/North

1. Name of Claimant (s) Richard E. Johnson Phone (208) 773 1369
Mailing Address PO Box 2288 Port Falls ID ZIP 83877-2288
Street or Box City State
2. Date of Priority (Only one (1) per claim) 04-22-1976
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____

4. a. Location of Point of Diversion is: Township 50 N, Range 05 W, Section 10,
NLE, 1/4 of NW, 1/4 Govt. Lot _____, BM., County of Kootenai

Parcel (PIN) no. 50 N 05 W - 10 - 2950

Additional points of diversion if any: _____

If available, GPS Coordinates 47.698686, -116.948642

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. 6" Well 72'6" Deep, 3/4 hp 109pm pump

Installed as Replacement for 1.5 HP 259pm pump @ 66'9" 10-25-03
piping for irrigation consists of 2 separate 1" pvc lines w/valves @
47.698379, -116.948504 AND 47.698926, -116.948463. There is also
an outdoor valve on the 1" galvanized mainline to house located at
47.698773, -116.948445, See Attached Map & Diagrams

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JAN 11 8 2010

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

For IRRIGATION purposes from 03-15 to 11-15 amount or .06

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

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

in the corresponding place of use below. See instructions for standard symbols.

[illegible]

Total number of acres irrigated 2

11. Do you own the property listed above as place of use? Yes (X) No ()
If your answer is No, describe in Remarks below the authority you have to claim this water right.

or None (☒)

MYRTLE JOHNSON (GRAND mother - deceased)

Please combine domestic + irrigation water right.

Attachments:

anien Photo

10000 Photo

Week Report

Last Name _____ Identification No. _____

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

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-7612

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: 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) R. E. Johnson Date: 01/27/10

Date: _____

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

Title of _____ 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, _____, 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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