

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 95-8235

Date Received: 10-5-10

Receipt No: N025946

Received By: CU

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

OCT - 5 2010

Please type or print clearly

IDWR/North

1. Name of Claimant (s) Cave Bay Community Services, Inc. Phone (208) 686 1353

Mailing Address PO Box 115 Worley ID ZIP 83876
Street or Box City State

2. Date of Priority (Only one (1) per claim) October 20 1982
Month Day Year (YYYY)

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

which is tributary to (b) _____

4. a. Location of Point of Diversion is: Township 48N, Range 04W, Section 29,
SW, 1/4 of SE, 1/4 Govt. Lot _____, BM., County of Kootenai

• Parcel (PIN) no. _____

Additional points of diversion if any: 48N 04W - 29 - SESE

If available, GPS Coordinates _____

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

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. _____

2 Wells: Well #1 is 167 feet bgs
Well #2 is 312 feet bgs

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Cave Bay Community Services, Inc

6. Water is claimed for the following purposes:

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

For Municipal Domestic purposes from 01/01 to 12/31 amount 0.20 or 144.8 AF

For Irrigation purposes from 03/15 to 11/15 amount 0.20 or 9.8 AF

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.20 (cfs) and/or (b) 144.8 (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) 225 Homesites, currently 180 service connections

9. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
48N	4W	29	41				41				42			5				7	
48N	4W	32	2				10			7	10								
within the distribution area of Cave Bay Community Services, Inc																			

Parcel (PIN) no(s) _____

Total number of acres irrigated 41

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.

Permit No. 95-11175 for Park Irrigation, 0.05 cfs + 3.0 afa or None ()

13. Remarks: Water Right No. 95-08235, License dated 29 Feb 96.

Proof of Beneficial Use dated Nov 18, 1992

Place of Use located within Carroll's Cave Bay Homesites, 1st through 6th editions

License has an error - Beneficial Use for Irrigation shows 97.6 AF - should be 9.8 AF, that added to the 135 AF sums to the 144.8 AF total.

Community has seen significant growth to include number of full time residents, maximum diversion capacity of 0.200 cfs will be inadequate in future due to that continued growth and need for

Additional storage for fire protection concerns. No current excess capacity on maximum use day, Last Name Cave Bay Community Identification No. SCANNED

and 90,000 gal storage depleted. Services, Inc

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Cave Bay Community Services, Inc

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 95-08235

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

President of Cave Bay Community Services, Inc.
Title Organization

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

President of Cave Bay Community Services, Inc.
Title Organization

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

➔ Signature of Authorized Agent Dave Curbish Date 9/26/10

Title and Organization President - Cave Bay Community Services, Inc.

➔ 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 _____

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Last Name Cave Bay Community Identification No. 95-08235
Services, Inc