

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 92-2003

Date Received: 5-29-14

Receipt No: NO 30477 #

Received By: cm

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

MAY 29 2014

Please type or print clearly

IDWR/NORTHERN

Phone (208) 245-2577

1. Name of Claimant (s) City of St. Maries

Mailing Address 602 College Ave.

St. Maries

ID

ZIP 83861

Street or Box

City

State

2. Date of Priority (Only one (1) per claim) 1/27/1909

Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (✓) (a) Springs

which is tributary to (b)

4. a. Location of Point of Diversion is: Township 46N, Range 02W, Section 21, SE, 1/4 of SE, 1/4 Govt. Lot, BM., County of Benewah

Parcel (PIN) no.

Additional points of diversion if any: 46N, 02W, Sec. 22, SW SW, Benewah County

If available, GPS Coordinates

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

Township, Range, Section, 1/4 of

Govt. Lot, BM., County of

ending point is: Township, Range, Section, 1/4 of

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. Sump and crib at each Spring; 1900 feet of 3-inch pipe and 800 feet of 2-inch pipe.

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Municipal purposes from 01/01 to 12/31 amount 0.05 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.05 (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.) Municipal: 1,569 connections

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	
			See Place of Use Map, Attachment #1 See Place of Use List, Attachment #2																

Parcel (PIN) no(s). _____ Total number of acres irrigated NA

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

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.

See Attachment #3 or None ()

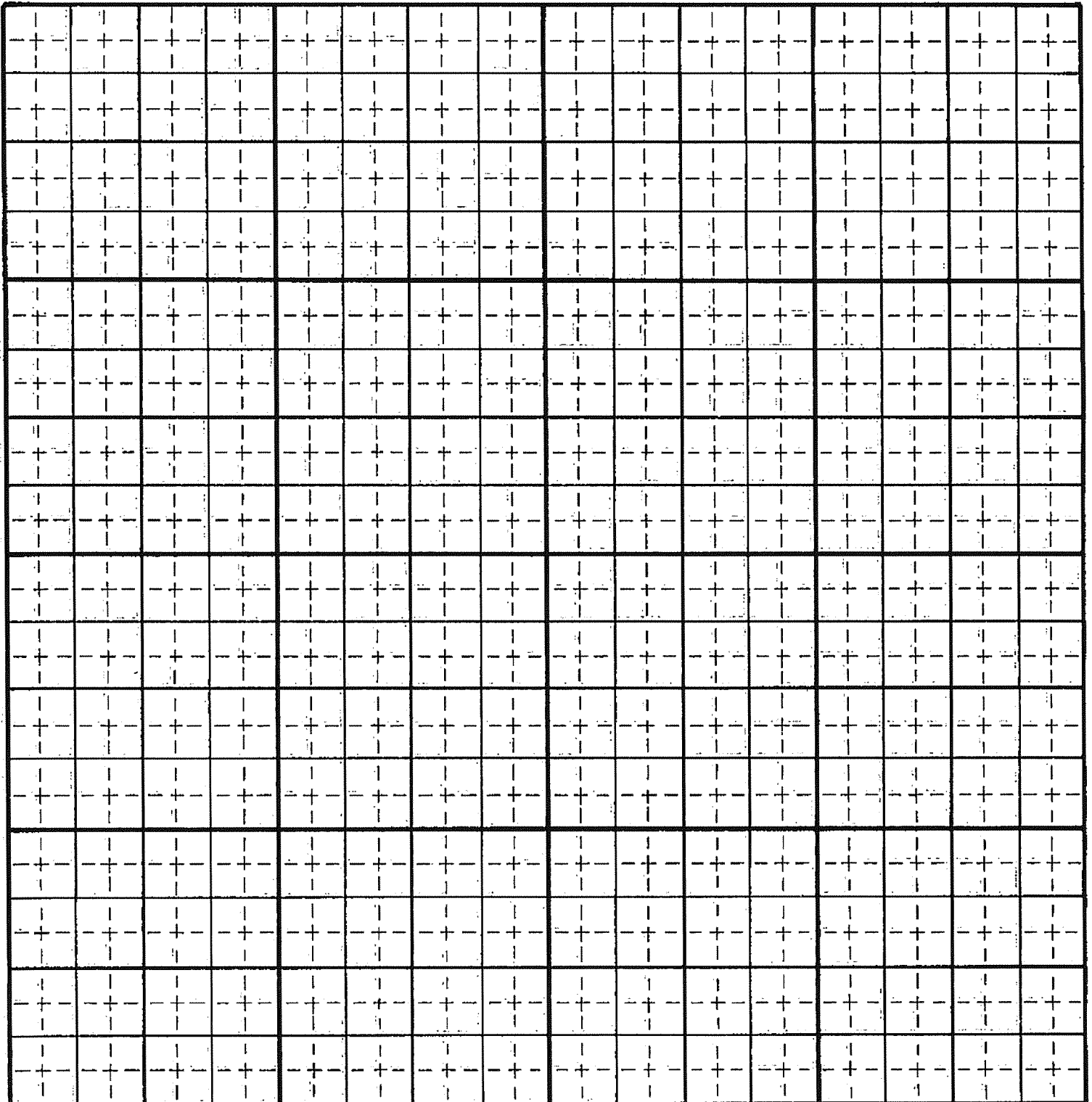
13. Remarks: The City of St. Maries is a public utility that provides water to the customers within their service area.

Last Name City of St. Maries Identification No. 92-2003

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.

See the Map of Project, Attachment #4

Scale: 2 Inches equals 1 mile



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 92-2003

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: 7

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

Mayor _____ of City of St. Maries _____,

Title

Organization

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

Mayor _____ of City of St. Maries _____,

Title

Organization

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

Signature of Authorized Agent Harry Sullivan Date May 27, 2014

Title and Organization Mayor, City of St. Maries

16. Notice of Appearance:

Notice is hereby given that I, Nancy A. Wolff, 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 Nancy Wolff Date 5/29/2014

Address Morris & Wolff, P.A.

722 Main Avenue St. Maries, Idaho 83861

Last Name City of St. Maries Identification No. 92-2003