

**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 49576
NUMBER:
Ident. Number: 95-16781 *lm*
Date Received: 05-15-2014
Receipt No.: N030450

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
RUSSELL E FLEET	13531 E NUNN RD	ATHOL	ID	USA	83801

2. Date of Priority:

Date	Explanation
12/31/1956	MOBILE HOME APPRAISAL RECORD FOR MOORE, A PRIOR OWNER OF MY PROPERTY (53N02W-298-6650)(SEE ATTACHED) SHOWS MOBILE HOME ON PROPERTY IN 1956. THERE IS A DRILLED WELL CASING ON THE PROPERTY FOR THE WELL I CURRENTLY USE. I HAVE BEEN UNABLE TO DETERMINE IF WELL 96-78-N-196 DRILED FOR COUTURE IS FOR A WELL ON MY PROPERTY. I BELIEVE THAT GORUNDWATER HAS BEEN IN USE ON MY PROPERTY SINCE 12.31.1956.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
53N	02W	29		SE	SW	KOOTENAI

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	2 HOMES

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.040	0.00	0.0

Totals:

CFS	AF	KW
0.040	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	53N	02W	29	SE	SW	KOOTENAI	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. Signature(s):

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice 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: 4

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): Russell E Fleet Date: 5-15-2014
 _____ Date: _____

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 _____

Please print name