

**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: 95-16778
Date Received: 05/07/14
Receipt No.: N 03 04 29

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
CHRISTINE JUSTIN	PO BOX 208	ATHOL	ID	USA	83801

2. Date of Priority:

Date	Explanation
4/29/2011	DRILLED WELL TAG D0058321 COMPLETED 4.29.2011 AND IMMEDIATELY CONNECTED TO EXISTING HOME AND SHOP ON BONNER COUNTY PARCEL RP54N03W326900A. HOME AND SHOP SHOWN ON ATTACHED 2009 AERIAL PHOTOMAP.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
54N	03W	32		SE	SW	BONNER

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

Water Use	Number Of Homes	Stock		Description
DOMESTIC	1	-		1 HOME
STOCKWATER	-	Type of Stock	Number of Stock	25 CHICKENS
		Chickens	11 - 25	

6. Season(s) of Use:

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

SCANNED
MAY - 7 2014

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.040	0.00	0.0
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.060	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	54N	03W	32	SE	SW	BONNER	-	-
STOCKWATER	54N	03W	32	SE	SW	BONNER	-	-
~~STOCKWATER~~	~~54N~~	~~03W~~	~~32~~	~~SW~~	~~SW~~	~~BONNER~~	~~-~~	~~-~~

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: 2

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): Christine Justice Date: 5-7-14
 _____ 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

SCANNED

MAY - 7 2014