

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: 94-9214

Date Received: 7/9/2013

Received By: *cm NO 30002*

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

RECEIVED
JUL 15 2013
IDWR/NORTHERN

1. Name of Claimant(s)

LEROY KEITH
PO BOX 155
KINGSTON ID 83839
JAN KEITH
PO BOX 155
KINGSTON ID 83839

2. Date of Priority: 1/19/1970

3. Source: COEUR D ALENE RIVER Tributary to: COEUR D ALENE LAKE

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
50N	03E	30	NE SE	8	SHOSHONE	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
IRRIGATION	05/01 10/01	0.08	21

7. Total Quantity Appropriated is: 0.08 C.F.S. and/or 21 A.F.A

8. Non-irrigation uses:

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
50N	03E	30	NE SW	8	IRRIGATION	7
Section Acres						7
Total Acres						7

10. Place of use in counties: SHOSHONE

11. Do you own the property listed above as place of use? Yes

12. Other Water Rights Used:

13. Remarks:

Priority date description:

94-9214

7/9/2013

SCANNED
JUL 15 2013

Description of use: Water Use

Description

IRRIGATION

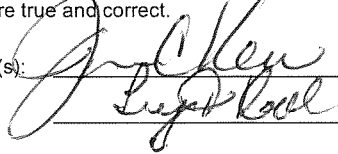
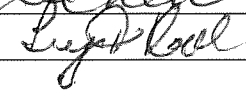
14. Basis of Claim: Beneficial Use

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 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.

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):

Date:

7/11/13

Date:

2/11/13

For Organizations: I do solemnly swear or affirm under penalty or 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