

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

ID Number: 95-16913

Date Received: 9-17-14

Receipt No: NO30814

Amount: \$25.00 By: cm

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For domestic and/or stockwater purposes where
daily use is less than 13,000 gallons per day

RECEIVED

SEP 17 2014

IDWR/NORTHERN

Please type or print clearly

- Name of claimant(s) Ryan M. Douglas and/or Brenna C. Douglas Phone (509) 991-4076
Mailing address 15498 W Destiny Dr. Post Falls ID ID ZIP 83854
Street or Box City State
- Date of priority (only one (1) per claim) May 1, 2005 Month/Day/Year (yyyy) (estimated date of occupancy of residence at 15498 W. Destiny Dr. by prior owners Colin & Elizabeth Pfister)
- Source of water supply (check one) Ground Water ☒ or Other () (a) which is tributary to (b)
- Location of point of diversion is: Township 50N, Range SW, Section 17,
SW 1/4 of NE 1/4, or Govt. Lot _____, B.M., County of Kootenai
Parcel (PIN) no. 50N05W-17-1400
Additional points of diversion, if any: _____
If available, GPS coordinates Well ID Number 95-94-N-0018-000 Welburn
- Description of diverting works (wells, pumps, spring boxes, pipelines, 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.
One well with pump and pipeline to residence
- Water is claimed for the following: (Limited to domestic and/or stockwater uses. See page 1 of the instructions.)
For Domestic purposes from Jan. 1 to Dec. 1 amount .04 cfs ☒ AFY ()
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed .04 cfs ☒ or AFY ()
8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): Domestic: One residence

9. Location of place of use is: Township SON, Range SW, Section 17, NW 1/4 of NE 1/4,
or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) SON05W-17-0900

For (check one) ☒ Domestic ☐ Stock ☐ Domestic and Stock ☐

Additional places of use, if any: _____

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.

_____ or None ☒

13. Remarks:

This well is shared with three other Parcels per Well Users Agreement and
Easement recorded in Kootenai County as Instrument No. 1382924 (copy attached),
Parcels SON05W-17-0600, SON05W-17-1050, and SON05W-17-1100

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 _____

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: 1

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) Tyla M Douglas Date: 9-15-2014

Breanna Douglas

Date: 9/15/14

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 _____

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 _____

DOUGLAS