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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

CIVIL CASE NUMBER: 49576

OF RIGHTS TO THE USE OF WATER FROM THE

COEUR D'ALENE- SPOKANE RIVER BASIN WATER SYSTEM

Ident. Number 92-10957

Date Received

Receipt No:

Received By:

Amended Claim
NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

LARRY SOTIN Phone: (208) 245-4676

82803 HWY 35

ST MARIES ID USA 83861

SUSAN SOTIN Phone: (208) 245-4676

82803 HWY 35

ST MARIES ID USA 83861

MICHELLE CHASE

248 EVERGREEN TERRACE RD

ST MARIES ID USA 83861

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2. Date of Priority: 01/01/1930

3. Source: SPRING Trib. to: *also Spring & SE - SW - G/L 6 & NESW*

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
46N	02W	25	<i>SW 1/4</i> NW SE	BENEWAH	

5. Description of diverting works: DEVELOPED SPRING CISTERN & WATER LINE TO 2 HOMES.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	<i>0.04</i> <i>0.008</i>	

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DOMESTIC

01/01 12/31 0.04 0.02 *ll*

7. Total Quantity Appropriated is:

0.06 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses: STOCKWATER USE IS FOR 30-40 GOATS

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	02W	25	NE	SW	DOMESTIC	
46N	02W	25	SE	SW	GL6 DOMESTIC	
✓ 46N	02W	25	SW	SE	DOMESTIC <i>ll</i>	
46N	02W	25	NE	SW	STOCKWATER	
46N	02W	25	SE	SW	GL6 STOCKWATER	
46N	02W	25	SW	SE	STOCKWATER <i>ll</i>	

11. Place of use in counties: BENEWAH

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

13. Other Water Rights Used:

14. Remarks: CLAIM WILL BE FILED FOR INSTREAM STOCKWATER USE OF WOLF DRAW CREEK

15. Basis of Claim: Beneficial Use

16. 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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):

Susan Lotin
Harry P. Johns

Date: *11/20/14*

Date: *11-20-14*

Date: _____

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State of Idaho)

) SS.

County of _____)

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____

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