

**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: 94-7129

Date Received: NOV 13 2014

Receipt No: BILL 0253

Amount: _____ By: _____

RECEIVED

NOV 13 2014

IDWR/NORTHERN

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

Please type or print clearly

1. Name of claimant(s) State of Idaho Department of Fish and Game Phone 208-334-3700
Mailing address PO Box 25 Boise ID 83707
Street or Box City State
2. Date of priority (only one (1) per claim) 12/01/1978
Month Day Year (yyyy)
3. Source of water supply (check one) Ground Water () or Other (x) (a) spring
which is tributary to (b) Coeur d'Alene River
4. a. Location of point of diversion is: Township 48N, Range 02W, Section 15,
NE 1/4 of NW 1/4, or Govt. Lot _____, B.M., County of KOOTENAI
Parcel (PIN) no. _____
Additional points of diversion if any: 2) T48N R02W Sec 21 NWNE & 3) 48N 02W Sec 15 SENE
If available, GPS coordinates: _____
b. If instream flow, beginning point of claimed instream flow is: Township _____, Range _____,
Section _____, _____ 1/4 of _____ 1/4, or Govt. Lot _____, B.M., County of _____
ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4 or
Govt. Lot _____, B.M., County of _____
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, 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.
5 foot storage earth filled dam with rock riprap. 24" CMP prefabricated overflow type (whistle tube) check dam
w/ cutoff collar installed in existing channel.

6. Water is claimed for the following purposes:

(both dates are inclusive mm-dd)

(cfs)

(acre-feet)

For Wildlife Storage purposes from Jan 1 to Dec 31 amount or 185 AF

For Recreation purposes from Jan 1 to Dec 31 amount or 185 AF

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) _____ (cfs) and/or (b) 185 AF (acre-feet)

8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served; Stockwater: type and number of livestock, etc.): _____

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

- b. If water is used for other purposes, place a symbol of use (e.g. D for domestic) in the corresponding place of use below. See instructions for standard symbols.

[illegible]

Parcel (PIN) no(s). _____

Total number of acres irrigated _____

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 (x) No ()

If your answer is no, describe in remarks below the authority you have to claim this water right.

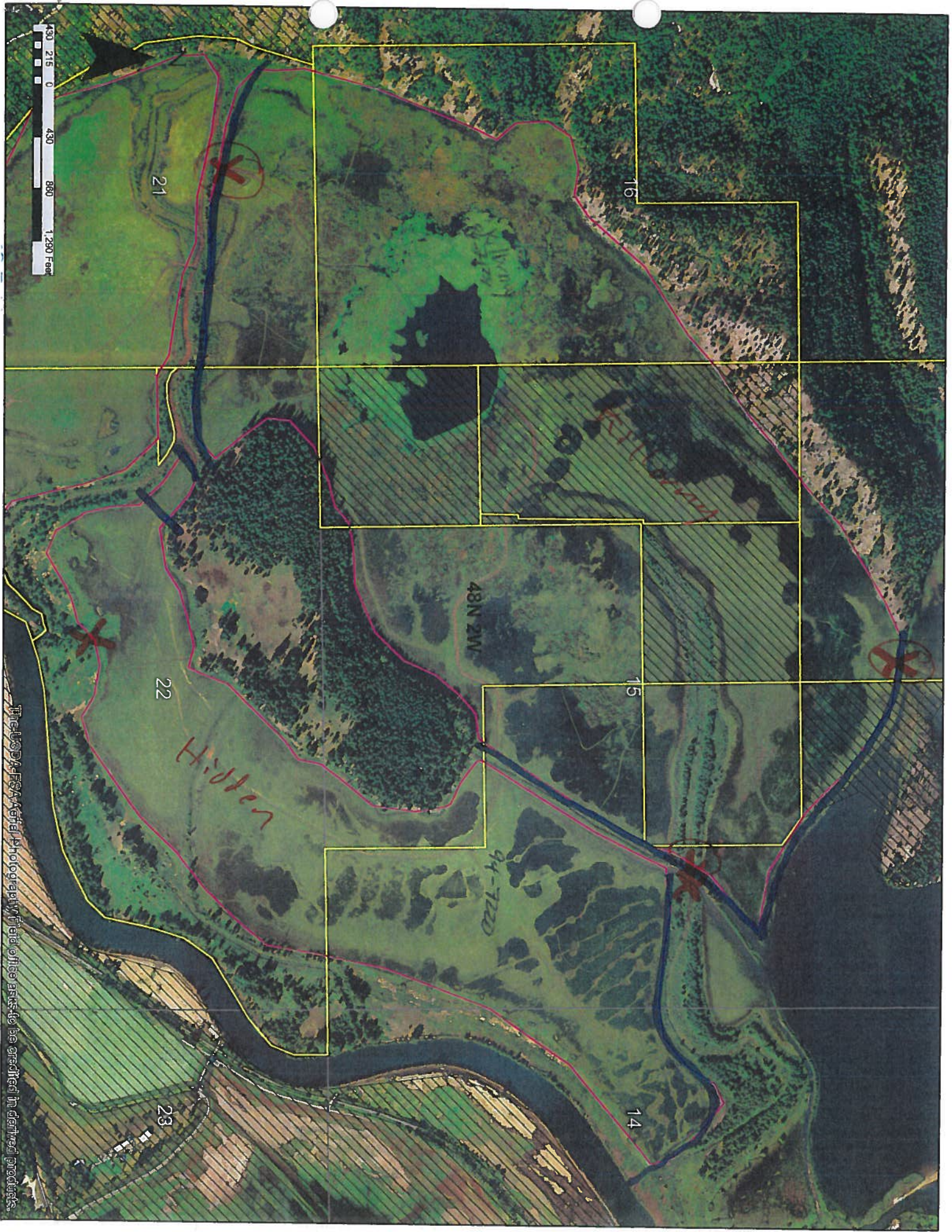
12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ()

13. Remarks:

Stabilization (by preventing annual fall draw-down) of water levels for wildlife management and for production of wild rice and other desirable aquatics.

Last name _____ Identification no. _____



430 215 0 430 860 1,290 Feet

21

16

48N 2W

15

22

Hidden

94-7220

14

23

The USDA-FSA Aerial Photography Field Office staff to be credited in dated products.

14. Basis of claim (check one) Beneficial Use () Posted Notice () License (X) Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable, provide IDWR water right number 94-7129

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 (X) 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) _____ Date: _____

_____ Date: _____

For organizations:

I do solemnly swear or affirm under penalty of perjury that I am

_____ of Idaho Department of Fish and Game
Title Organization

that I have signed the foregoing document in the space below as

_____ of Idaho Department of Fish and Game
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of authorized agent [Signature] Date 11/10/12

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 _____

Last name _____ Identification no. _____