



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815-7763
Phone: (208) 762-2800 • Fax: (208) 762-2819 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

December 23, 2014

DUANE OR CATHERINE PIERCE
65 GRANDMAS WAY
ST MARIES ID 83861

SUBJECT: Notice of Error Replies on Notice of Claim to a Water Right Numbers 91-7267 & 91-7271

RESPONSE DEADLINE
DATE: January 15, 2015

Dear Mr. or Ms. Pierce:

We have received your Notice of Error Replies on the above claims indicating that you wish to make a change to our recommendation by changing the total quantity of water from 0.04 cubic feet per second (cfs) to 0.06 cfs.

I have amended the claims (item seven) to show a total quantity of 0.06 cfs. To complete such change, please sign and date the claim forms (item 15) and return to my attention by the response date above.

Please feel free to contact me if you have any questions. I can be reached at (208) 762-2802 or by email at linda.werner@idwr.idaho.gov.

Sincerely,

Linda A. Werner
Water Resource Agent, Sr.

Enclosure: Amended Copy of Claim Numbers 91-7267 & 91-7271

COPY

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: 91-7267

Date Received: 1/28/2011

Receipt No: N026518

Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

DUANE L PIERCE SR. Phone:(208) 245-3979

65 GRANDMA'S WAY

SAINT MARIES ID 83861

CATHERINE A PIERCE Phone:(208) 245-3979

65 GRANDMAS WAY

SAINT MARIES ID 83861

2. Date of Priority: 12/31/1941

3. Source: GROUND WATER Tributary to:

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>
46N	02W	8	NE SW	1	BENEWAH	

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>
DOMESTIC	01/01 12/31	0.04	
STOCKWATER	01/01 12/31	0.02	

7. Total Quantity Appropriated is: 0.06 C.F.S. and/or A.F.A

8. Non-irrigation uses:

<u>Number of Homes: 1</u>	<u>Water Use</u>	<u>Type Of Stock</u>	<u>Number Of Stock</u>
	STOCKWATER	Mixed Stock	10

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>
46N	02W	8	NE SW	1	DOMESTIC	
					Section Acres	

<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>
46N	02W	8	NE SW	1	STOCKWATER	
					Section Acres	

91-7267

12/23/2014

COPY

Total Acres

10. Place of use in counties: BENEWAH

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

12. Other Water Rights Used:

13. Remarks:

Priority date description: THE PIERCE FAMILY HAS OWNED THIS PROPERTY SINCE 1917. A HOME (CALLED THE WHITE HOUSE) WAS BUILT IN 1941 AND SERVED BY A DUG WELL ON THE SAME PROPERTY (SEE ATTACHMENT). A DRILLED WELL (91-86-N-1) REPLACED THE DUG WELL FOR A NEW HOME ON THE PROPERTY IN 1986.

Description of use:	<u>Water Use</u>	<u>Description</u>
	DOMESTIC	
	STOCKWATER	SHEEEP HORSES PIGS

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: _____
_____ Date: _____

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