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JUL 26 2011

DEPARTMENT OF
WATER RESOURCES

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: 94-7339

Date Received: 6/28/2011

Receipt No: C093486

Received By:

7/26/2011
C093486
\$26-
SBR

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

1. Name of Claimant(s)

NORTH IDAHO MOUNTAIN Phone:(208) 556-1120
BREW
108 NINE MILE RD
WALLACE ID 83837

2. Date of Priority: 5/10/1992

3. Source: NINEMILE CREEK Tributary to: SOUTH FORK COEUR D ALENE RIVER

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>
48N	04E	27	SE SE		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>
FIRE PROTECTION	1 /1 12/31	0.02	0
IRRIGATION	3 /15 11/15	0.02	3

7. Total Quantity Appropriated is: 0.02 C.F.S. and/or 3 A.F.A

8. Non-Irrigation uses:

9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	04E	26	SW SW		FIRE PROTECTION	

Section Acres

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	04E	26	SW SW		IRRIGATION	0.5

Section Acres 0.5

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	04E	27	SE SE		FIRE PROTECTION	

Section Acres

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	04E	27	SE SE		IRRIGATION	0.5

Section Acres 0.5

Total Acres 1

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:

Description of use: Water Use Description

FIRE PROTECTION

IRRIGATION

14. Basis of Claim: License

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): [Signature] Date: July 21-11

[Signature] Date: 7/21/11

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

Partner of North Idaho Mt Brew LLC
Title Organization

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

Partner of North Idaho Mt Brew LLC
Title Organization

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

Signature of Authorized Agent [Signature] Date: July 21-11

Title and Organization Partner North Idaho Mt Brew LLC
Please print name