

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 95-13108Date Received: 8/11/09Receipt No: N021719Received By: km

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

1. Name of Claimant(s) DAVID & Ann Lepire Phone 208 666-1164Mailing Address 13225 E. MARIE CREEK RD CDA, ID Zip 83814
Street or Box City State2. Date of Priority: (Only one per claim) 4-21-1993
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township 50N, Range 2W, Section 21,
NE 1/4 of NE SW 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. -5050

Additional points of diversion if any: _____

If available, GPS coordinates: _____

5. 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.

WELL & Pump

6. 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 31 amount .04 cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 cfs () or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 Household

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9. Location of Place of Use is: Township 50N, Range 2W, Section 21,

NE 1/4 of SW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

If different than shown in Item 4

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 the 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:

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: 2

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: 8-11-2009

Date: 8-11-2009

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 _____

Address _____

Date _____

Last Name _____ Identification No. _____

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State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

[illegible]

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Parcel No 50N02111-21-5050Name/Address Juliana Wilkert13255 Marie Ck. Rd.C/A

Legal Description _____

Property Address 13255 Marie Creek Rd.

Inspected By CHE Date 11-9-95 Rev Yr _____
Computed By _____ Date _____ Rev Yr _____
Certified Appraiser _____ Date _____ Rev Yr _____
Assessor _____ Date _____ Rev Yr _____
Reinspection _____ Date _____ Rev Yr _____

IDAHO RESIDENTIAL PROPERTY RECORD

Sheet No _____ of _____

MISCELLANEOUS DATA

Class _____
Use Code 3411 444
Units 4
Market Grade _____
Year Built 1993
Year Remodeled _____
Effective Age _____
Effective Year _____
Shape Code _____
Date Occupied _____

YES	NO

Prebuilt _____
Building Permit _____
Under Construct. _____

Photo No. _____

VALUES SUMMARY

	YEAR <u>93</u>	YEAR
Residence	\$ _____	\$ _____
Garage	\$ _____	\$ _____
Carport	\$ _____	\$ _____
Other	\$ _____	\$ _____
Total Improve	\$ <u>69,485</u>	\$ _____
Land	\$ _____	\$ _____
MARKET VALUE	\$ _____	\$ _____

PURCHASE INFORMATION

Price	_____	Date	_____
Price	_____	Date	_____
Asking	_____	Date	_____
Rent	_____	Per	_____

REM
MAR 14 1997

LAND INFORMATION

01 NEIGHBORHOOD		02 OFF-SITE IMPROVEMENTS		03 TOPOGRAPHY	04 WATER FRONT PROPERTY		05 ON-SITE UTILITIES	
01 Urban	06 Stable	Street	04 Asphalt/Conc	01 Low	01 Lake	5 Beach	01 Electricity	05 Public Water
02 Suburban	07 Improving	01 None	05 Gravel/Dirt	02 Level	02 River/Creek	None P F A G E	02 Gas	06 Private Well
03 Rural	08 Declining	02 Public Access	06 Sidewalks	03 Moderate Slope	03 Accretion	7 Grade	03 Underground Eect/Telephone	07 Public Sewer
04 Recreational		03 Private Access	07 Curb/Gutters	04 Steep Slope	04 Bluff Land	P F A G E	04 Cable TV	08 Septic System
90		90		90	05 Flood Plain	90	90	

06 SUBJECT DIMENSIONS		07 SITE INFORMATION		08 REMARKS	
Frontage	01 Location P F A G E	01 Location P F A G E			
Depth	02 Amenities P F A G E	02 Amenities P F A G E			
Other	03 Landscaping P F A G E	03 Landscaping P F A G E			
	04 View P F A G E	04 View P F A G E			
	05 Detriments Few Many None	05 Detriments Few Many None			
	06 Zoned	06 Zoned			

09 COMPOSITE ADJUSTMENT							10 SITE ADJUSTMENTS						
CAT	LOC	CLASS	TYPE	UNIT	QTY	COST	BASE VALUE	01 Location	10 Access	20 View	30 Topography	40 Width	TOTAL
								50 Depth	60 Platage	70 Beach	80 Corner	90	FACTOR

APPRaiser _____ APPRAISAL DATE: _____ REVIEW YR _____
REINSPECTED APPR. _____ DATE _____ REVIEW YR _____

LAND VALUE \$ _____

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UAD-RC
REV. 5-90