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JUN 29 2015

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS DEPT. OF WATER RESOURCES

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: 91-7502

Date Received: 6/24/2015

Receipt No: N027541

Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

STEVEN OTTO GEIKE Phone:(309) 282-8546

PO BOX 35

ST MARIES ID 83861

FRANCINE MARIE GEIKE Phone:(309) 282-8546

PO BOX 35

ST MARIES ID 83861

2. Date of Priority: 3/2/1994

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
46N	03W	4	NE NE	8	BENEWAH	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From To	C.F.S.	(or) A.F.A
DOMESTIC	01/01 12/31	0.04	

7. Total Quantity Appropriated is: 0.04 C.F.S. and/or A.F.A

8. Non-irrigation uses:

Number of Homes: 1	Water Use	Type Of Stock	Number Of Stock

9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	03W	4		1	DOMESTIC	
						Section Acres
						Total Acres

10. Place of use in counties: BENEWAH

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

12. Other Water Rights Used:

91-7502

6/24/2015

13. Remarks:

Priority date description:

Description of use: Water Use
DOMESTIC

Description
DOMESTIC-1 HOME

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 X 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: 6/24/15
[Signature] Date: 6/24/15

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

It is Informational for
Property Assessment Only.



