

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

RECEIVED

OCT 13 2015
DEPARTMENT OF
WATER RESOURCES

Ident. Number 95-13529
Date Received: 9/23/2010
Receipt No: T091801
Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

BARBARA SCHNURR

Phone: 208-582-1585

2601 N BARKER RD #107
SPOKANE VALLEY WA USA 99027

DANIEL KELLY

Phone: 509-953-2826

8311 N TRACY RD
SPOKANE WA USA 99217

JILL KELLY

Phone: 509-953-2826

8311 N TRACY RD
SPOKANE WA USA 99217

TIM MADSEN

Phone: 509-939-1467

12021 N WHITEHOUSE
SPOKANE WA USA 99218

LARRY MADSEN

Phone: 509-283-2419

PO BOX 287
ROCKFORD WA USA 99030

BEV MADSEN

Phone: 509-283-2419

PO BOX 287
ROCKFORD WA USA 99030

2. Date of Priority: 06/07/1996

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
47N	03W	30	SE SE 7	KOOTENAI	

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1 /1	12/31	0.03	

7. Total Quantity Appropriated is:
0.03 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 4

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
47N	03W	30	SE	SE	7	DOMESTIC
			NE	SE		DOMESTIC
			SE	SE		DOMESTIC

11. Place of use in counties: KOOTENAI

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Beneficial Use

16. 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.

Number of attachments: 0

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: _____

Number of attachments: 0

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Barbara L. Schurr Date: 10/6/2015

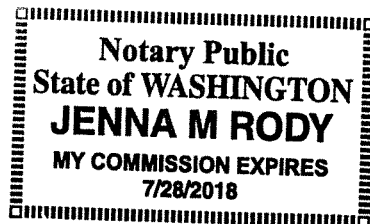
Date:

State of ~~Idaho~~ Washington)
County of Kootenai Spokane) ss.

Subscribed and sworn (or affirmed) before me this 6th day
of October 2015

Jenna M. Rody

Notary Public



Residing at Spokane Valley, WA

My commission Expires 07/28/2018