

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 95-14551Date Received: 10/30/2009Receipt No: N022671Received By: JVM

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) Wayne and Patricia Early Phone (208) 772-3576

Mailing Address 3774 W. Bear Ave Hayden Idaho Zip 83835
Street or Box City State

2. Date of Priority: (Only one per claim) 08-10-1995
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____

4. Location of Point of Diversion is: Township S1N, Range 04W, Section 29,
NW 1/4 of NW 1/4, or Govt. Lot 0 BM. County of Kootenai;
Parcel (PIN) no. S1N 04W-29-3100

Additional points of diversion if any: N-A

If available, GPS coordinates: N-A

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 95-95-N-040 Drilled For Water in
1995 (W.R. 95-8922) connected to 1 Home

6. Water is claimed for the following: (Limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from 01-01 to 12-31 amount 04 cfs or AFY ()

For Stock Water purposes from 01-01 to 12-31 amount 02

7. Total Quantity claimed 06 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 Home up to 25 Head

Mixed Stock

SCANNED
OCT 30 2009

9. Location of Place of Use is: Township 51N, Range 04W, Section 29
NW 1/4 of NW 1/4, Govt. Lot 0 BM. Parcel (PIN) no. 51N-04W-29-3200
for (Check One) Domestic (☒) Stock (☒) Domestic and Stock (☒) If different than shown in Item 4

Additional places of use, if any 51N-04W-29-3100

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:

95-8922 Permit Lapsed. Domestic uses Documented
in permit application. Permit started by Montenegro

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) [Signature] Date: 10-30-09

Date: _____

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

Title of _____ Organization

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

Title of _____ 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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