

**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: 95-15872
Date Received: 9/29/2011
Receipt No.: 2028198

dm

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DEMILLE FAMILY TRUST	325 AL & #20 S WELDING RD	SPIRIT LAKE	ID	USA	83869

2. Date of Priority:

Date	Explanation
1/1/1983	BONNER COUNTY ASSESSOR RECORDS INDICATE APPRAISER SAW HOME ON PROPERTY IN 1983. NO OTHER SOURCE OF WATER, OTHER THAN WELL CLAIMED, IS AVAILABLE ON PROPERTY.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
54N	04W	19		SW	NE	BONNER

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	TWO MOBILE HOMES ON PROPERTY UNDER SINGLE OWNERSHIP (ONE 1985 FLEETWOOD AND ONE 1984 LIBERTY). ORIGINAL HOME ON PROPERTY 1983.
STOCKWATER	-	Type of Stock	40 EMUS AT ONE TIME.
		Number of Stock	
		Other	26 - 50

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

SCANNED
SEP 29 2011

STOCKWATER	1 / 1	12 / 31
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7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.080	0.00	0.0
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.080	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	54N	04W	19	SW	NE	BONNER	-	-
STOCKWATER	54N	04W	19	SW	NE	BONNER	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. 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.

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: _____
 _____ Date: _____

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

Truster Joyce DeMille of DeMille Family Trust
 Title Joyce DeMille Organization 9/29/11

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

SCANNED
 SEP 28 2011