

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 95-10626Date Received: 5-5-09Receipt No: NO 20483Received By: cm

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

RECEIVED

MAY - 5 2009

IDWR/North

1. Name of Claimant(s) Keith R. Kroetch Phone (248) 661-3958Mailing Address P.O. Box 742 Coeur d'Alene Id Zip 83816
3482 Hwy 955 Ida 83814 City State2. Date of Priority. (Only one per claim) 12/19/1983
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water () or Other (X) (a) Well
which is tributary to (b) _____4. Location of Point of Diversion is: Township 50N, Range 04W, Section 22
SW 1/4 of NW 1/4, or Govt. Lot _____ BM. County of Kootenai
Parcel (PIN) no. _____ Well ID # 95-83-11-0022-000

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.

Put in for Clarence Wicks by Ida. Ivan. Dept after highway relocation
(4595 S.) 8" - 360' (355' casing) SWL 15', 15 GPM - Rotary air
12/19/83

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 to Dec amount 15 GPM

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 15 GPM cfs () or AFY ()

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

Stockwater and Number of livestock) Domestic

SCANNED

MAY - 5 2009

9. Location of Place of Use is: Township 50, Range 4, Section 22.

SW 1/4 of NW 1/4, Govt. Lot _____ BLM 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:

State of Idaho took out original well, built new one for Judith/Clarence
Wicks. Krietch bought from Wicks 10 yrs ago. Relocated well due to
new highway construction. Old well abandoned (95-79-N 0125-000)

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: _____

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) Perit R. Clark Date: May 9, 09
_____ Date: _____

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 _____ Date _____

Address _____

Last Name _____ Identification No _____

COANNED

MAY - 5 2009