

RECEIVED

MAY 15 2017

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO
IN AND FOR THE COUNTY OF TWIN FALLS

DEPARTMENT 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: 95-16512
Date Received: 9/14/2012
Receipt No: N029491
Claim Fee:
Received By: _____

**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)

KAREN A CHARBONNEAU
4330 S STATELINE RD
POST FALLS ID 83854

Phone: (208) ~~457-7230~~ 446-7961

Email: shipscatbooks@jrcda.com

AND

JAY N FROMKIN
4332 S STATELINE RD
POST FALLS ID 83854

Phone: (208) ~~457-7230~~ 446-7985

Email: fromkin@jrcda.com

2. Date of Priority: 9/7/2012

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
50N	06W	25	SW NE		KOOTENAI	

5. Description of diverting works:

Well Tag # D0055422

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	1/1	12/31	0.04		

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or ___ A.F.A.

8. Non-irrigation uses:

Domestic use for 1 home

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
50N	06W	25	SW		NE		
50N	06W	25	SE		NW		

10. Do you own the property listed above as place of use? ~~No~~ Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks and Priority Date Explanation:

SUBMERSIBLE PUMP INSTALLED 9.4.2012. PUMP RAN FOR TWO DAYS AND WE THEN STARTED DRINKING WATER FROM THE WELL 9.7.2012.

13. Basis of Claim: Beneficial Use

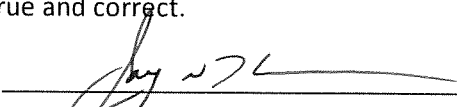
14. Signature(s)

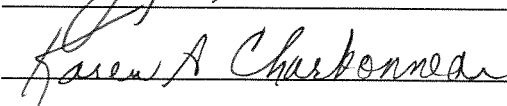
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do _____ do not ☒ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

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: 5/9/17

 Date: 5/9/17