

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 95-12353Date Received: 7-17-09Receipt No: N021386Received 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

JUL 17 2009

IDWR/North

1. Name of Claimant(s) Ronald Eugene Horn Phone 208 691-7543Mailing Address P.O. BOX 1092 Alhol ID 83801
Street or Box City State Zip2. Date of Priority: (Only one per claim) October 12, 2006
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 53 N, Range 3 W, Section 14
NW 1/4 of SE 1/4, or Govt. Lot _____ BM. County of _____Parcel (PIN) no. -8100

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.

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

For Domestic purposes from 1/1 to 12/31 amount .04 cfs () or AFY ()
Month/Day Month/Day

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 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

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9. Location of Place of Use is: Township 53 N, Range 3 W, Section 14,
NW 1/4 of SE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
for (Check One) Domestic (☒) Stock () Domestic and Stock () If different than shown in Item 4

Additional places of use, if any _____

10. In which county (ies) are lands listed above as place of use located? Kootenai County

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:

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: 7/15/09

[Signature] Date: 7/15/09

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. _____

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5 Year Performance Plus

2 and 3 HP, single phase Grundfos pumps on Grundfos motors (SP) and Grundfos controls (SA-SPM5)

Dear Grundfos Dealer:

To make certain your customer's Grundfos submersible pump is fully covered under the supplemental *Performance Plus warranty program*, READ AND FOLLOW THESE INSTRUCTIONS:

- Please type or print clearly.
- Complete this policy application in full.
- Then sign and date the application.

Your customer should keep the top white copy of the application. Keep the yellow copy for your records and send the two remaining copies (pink and goldenrod) to your Grundfos distributor.

Should the pump fail due to any of the conditions specified under the *Performance Plus* prior to the expiration of the 5-year term of the policy, your customer should contact you. You then pull the pump and determine if the cause of failure is within the terms of the *Performance Plus warranty policy*. If it is, Grundfos will repair or replace the pump at no charge through your distributor.

The *Performance Plus* warranty does not cover the labor charges involved in pulling and reinstalling the pump.

The *Performance Plus* warranty policy covers all Grundfos domestic submersible pumps from 2 to 3 HP single phase Grundfos pump on Grundfos motor (SP) and using Grundfos controls (SA-SPM5). It is limited to the original owner of the pump and is non-transferable.

Customer Name NORA HORN

Address PO BOX 692

City ATHOL State ID Zip 83801

Grundfos Dealer Name UNITED PUMP & DRILLING

Address 3125 W HAYDEN AVE

City HAYDEN State ID Zip 83835

Pump Model: 10S20-27	Pump Date Code: P10640US
Motor Voltage: 230 VOLT	Motor Date Code: P10623
Control Box Model: GRUNDFOS	Controller Date Code: UNKNOWN
Date Installed: 10-12-06	Application: WELL PUMP
Pump Water Level: 371'	Pump Setting: 420'
Well Inside Diameter: 6"	Depth: 438'
Flow (GPM): 10 GPM	Lightning Arrestor Type: N/A
New Installation or Replacement: NEW	Brand of Pump Replaced: N/A

I certify that a lightning arrestor has been installed with this Grundfos submersible, and that the unit has been installed in accordance with the Grundfos Installation and Operating Instructions.

Dealer Signature: Jamie Reese Date: 10-20-06

Mike McDowell
Kootenai County Assessor
451 Govt Way PO Box 9000
Coeur d'Alene ID 83816-9000

2006 Occupancy - Real Property
ASSESSMENT NOTICE

For any questions, please notify the assessor's office immediately
Assessor's Phone Number: 208-446-1500

Parcel Address: 8918 E SNOWY LN

Appeals of your property value must be filed
in writing, on a form provided by the County, by:

1/17/2007

HORN RONALD
PO BOX 692
ATHOL ID 83801

Tax Code Area: 156000
Neighborhood: 0
PIN #: MZZ33W143240
301769
524202

8948 Snowy Ln
Athol ID 83801

ASSESSED VALUE OF YOUR PROPERTY

CURRENT DESCRIPTION	LOTS/ACRES	LAST YEAR'S VALUE	CURRENT YEAR'S VALUE
Months			3
46 Mfg housing Occupancy Value			117,747
Total Prorated Supplemental Value			29,437
LESS HOMEOWNERS: EXEMPTION:			14,719
NET TAXABLE:			14,717

TAXING DISTRICTS	LAST YEAR'S TAXES	CURRENT YEAR'S ESTIMATED TAXES	PHONE NUMBER	DATE OF PUBLIC BUDGET HEARING
1-KOOTENAI CO			208-446-1600	Sept 5, 2006 7:00pm
227-LAKES HIGHWAY			208-772-7527	Aug 21, 2006 1:15pm
252-TMBR LK FIRE			208-683-3333	Aug 16, 2006 7:00pm
271-CO LIBRARY			208-772-5612	Aug 30, 2006 2:30pm
351-N ID COLLEGE			208-769-3340	June 21, 2006 6:00pm
354-KOOTENAI-EMS			208-676-8739	July 27, 2006 3:00pm
231-SCHL 272-BOND			No Response	No Response
231-SCHL 272-OTHER			No Response	No Response