

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 95-14229

Date Received: 7-15-10

Receipt No: 1025214

Received By: N. Steadung

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) ORVAL & ANITA JANSSEN Phone (509) 456-3842
509 990-5109 cell
Mailing Address 639 N. RIVERPOINT BLVD., I-W, SPOKANE, WA Zip 99202
Street or Box City State
2. Date of Priority: (Only one per claim) JULY 13, 2010
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water (X) or Other () (a) well drilled by
H₂O in Coeur d'Alene in the year 2000. Well TAG # D0013660
which is tributary to (b)
4. Location of Point of Diversion is: Township 49 N, Range 4 WEST, Section 13,
1/4 of 1/4, or Govt. Lot _____ BM. County of KOOTENAI
Parcel (PIN) no. 01826000011A Plat recorded in book D of plats,
page 104 - records of Kootenai County
Additional points of diversion if any: Well on lot 11 shared with
lot 12 by a legal agreement
and a water pipe
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. approximately half the water on lot 11's well is
diverted to lot 12 via a simple pipe from the
pressure tank (which is in a vault near the well on lot 11.)
6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)
For only domestic purposes from _____ to _____ amount _____
Month/Day Month/Day cfs () or AFY ()
For _____ purposes from _____ to _____ amount _____
7. Total Quantity claimed 06 cfs () or AFY () summer use mostly
with less than 0.1 cfs the rest of the year.
8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;
Stockwater and Number of livestock) NO
LIVESTOCK

SCANNED
JUL 15 2010

9. Location of Place of Use is: Township 49 N, Range 4 W, Section 13,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 018200000 11 A
for (Check One) Domestic (X) Stock () Domestic and Stock () If different than shown in Item 4

Additional places of use, if any NONE

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 (X) 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:

WELL LOCATED ON LOT 11. USES & EXPENSES
SHARED BY OWNERS.

14. Basis of Claim (Check One) Beneficial Use (X) 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 (X) 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) Orval Janssen Date: 7-13-2010

Anita Janssen Date: 7-13-2010

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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