

**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 95-15369

Date Received: 6-10-11

Receipt No: N027662

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) C HOWIE HODGSON Phone (208) 245-3208

|                 |                       |           |       |     |       |
|-----------------|-----------------------|-----------|-------|-----|-------|
| Mailing Address | 8820 BENEWAH CREEK RD | ST MARIES | ID    | Zip | 83861 |
|                 | Street or Box         | City      | State |     |       |

2. Date of Priority: (Only one per claim) 12-31-1970  
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ( ) or Other (✓) (a) SPRING  
which is tributary to (b) SINKS

4. Location of Point of Diversion is: Township 45N, Range 03W, Section 17  
NE 1/4 of NW 1/4, or Govt. Lot \_\_\_\_\_ BM. County of BENEWAH

Parcel (PIN) no. RP45N03W172010A

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 0.04 cfs ( ☒ ) or AFY ( )

For STOCKWATER purposes from 1/1 to 12/31 amount 0.03

7. Total Quantity claimed 0.04 cfs (✓) or AFY ( )

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

Stockwater and Number of livestock) DOMESTIC FOR 1 HOME AND STOCKWATER FOR UP TO 100 HEAD  
OF MIXED STOCK

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9. Location of Place of Use is: Township 45N, Range 03W, Section 17,  
NW 1/4 of NW 1/4, Govt. Lot \_\_\_\_\_ BM. Parcel (PIN) no. RP45N03W173100A  
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? BENEWAH

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) C. Howie Hodgson Date: 6-10-11

\_\_\_\_\_  
Date: \_\_\_\_\_

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

\_\_\_\_\_  
Title of \_\_\_\_\_ Organization

that I have signed the foregoing document in the space below as

\_\_\_\_\_  
Title of \_\_\_\_\_ 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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# HODGSON MAP

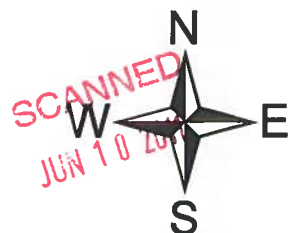


## Legend

0 195 390 780 Feet

• Working\_POD

 Working\_POU



Parcel No. **RP45U03W173100A** Code Area  
 Name/Address **Hedgson, Donald**

Legal Description

Property Address

Inspected By **JB** Date **7/91** Rev. Yr. **92**  
 Computed By \_\_\_\_\_ Date \_\_\_\_\_ Rev. Yr. \_\_\_\_\_  
 Certified Appraiser \_\_\_\_\_ Date \_\_\_\_\_ Rev. Yr. \_\_\_\_\_  
 Assessor \_\_\_\_\_ Date **3/21/96** Rev. Yr. **90**  
 Reinspection \_\_\_\_\_

# IDAHO RESIDENTIAL PROPERTY RECORD

## MISCELLANEOUS DATA

Class **342**  
 Use Code **3**  
 Market Grade **970**  
 Year Built **970**  
 Year Remodeled **970**  
 Effective Age **B**  
 Effective Year **B**  
 Shape Code **B**  
 Date Occupied

Prebuilt

Building Permit

Under Construct

Photo No.

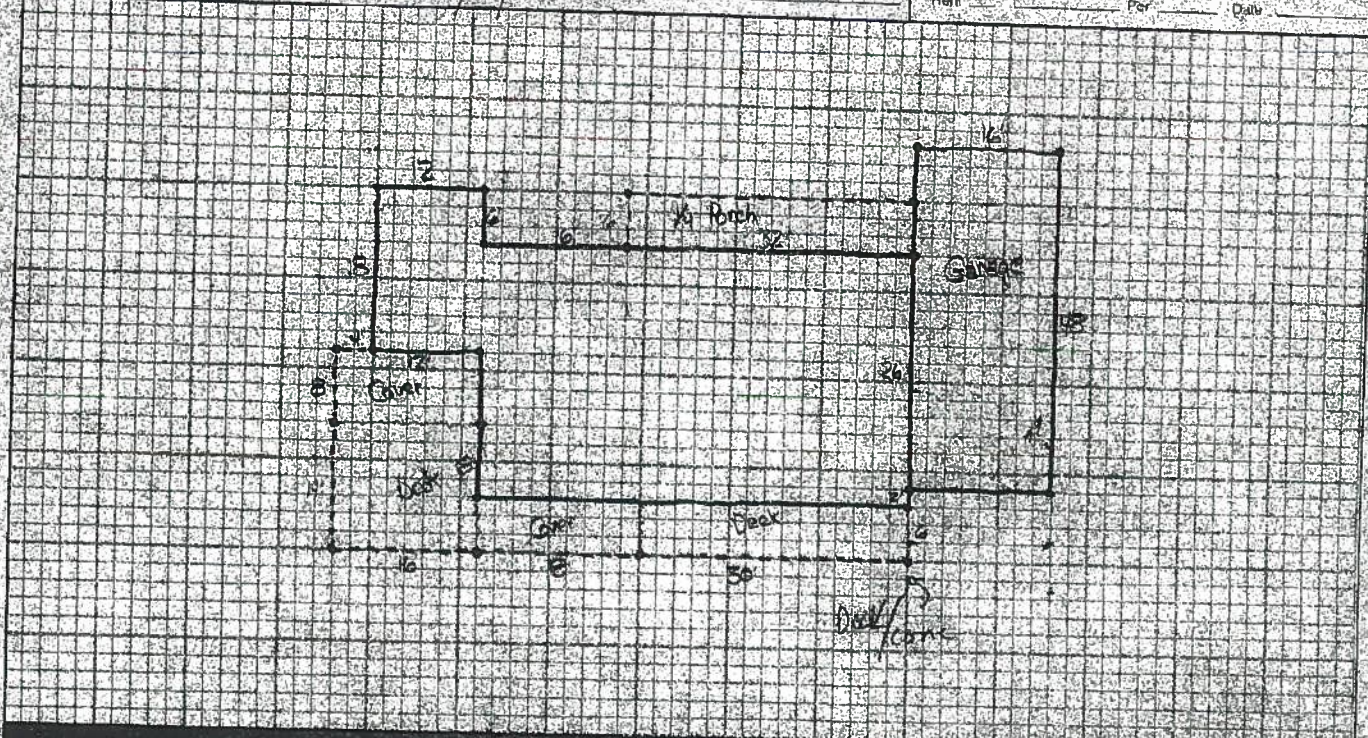
## VALUES SUMMARY

YEAR YEAR

Residence \$  
 Garage \$  
 Carport \$  
 Other \$  
 Total Improve \$  
 Land \$  
 MARKET VALUE \$

## PURCHASE INFORMATION

Price \_\_\_\_\_ Date \_\_\_\_\_  
 Price \_\_\_\_\_ Date \_\_\_\_\_  
 Asking \_\_\_\_\_ Date \_\_\_\_\_  
 Rent \_\_\_\_\_ Per \_\_\_\_\_ Date \_\_\_\_\_



## LAND INFORMATION

|                                                      |              |                           |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|------------------------------------------------------|--------------|---------------------------|------------------|-------------------|----------------|-------------------------|-------------------------|----------------------|--------------|----------|---------------|----------|-----|-----------|
| 01 NEIGHBORHOOD                                      |              | 02 OFF-SITE IMPROVEMENTS  |                  | 03 TOPOGRAPHY     |                | 04 WATER FRONT PROPERTY |                         | 05 ON-SITE UTILITIES |              |          |               |          |     |           |
| 01 Urban                                             | 06 Slab      | 01 Street                 | 04 Asphalt/Driv  | 01 Low            | 01 Lake        | 01 Beach                | 01 Electricity          | 05 Sewer/Water       |              |          |               |          |     |           |
| 02 Suburban                                          | 07 Improving | 02 None                   | 05 Gravel/Dirt   | 02 Level          | 02 River/Creek | 02 None, P.F.A.G.E.     | 02 Gas                  | 06 Private Well      |              |          |               |          |     |           |
| 03 Rural                                             | 08 Declining | 03 Public Access          | 06 Sidewalk      | 03 Moderate Slope | 03 Accretion   | 03 Grade                | 03 Underground Electric | 07 Public Sewer      |              |          |               |          |     |           |
| 04 Recreational                                      |              | 04 Private Access         | 07 Ditch/Gutters | 04 Steep Slope    | 04 Bluff Land  | 04 P.F.A.G.E.           | 04 Cable TV             | 08 Septic System     |              |          |               |          |     |           |
| 90                                                   |              | 90                        |                  | 90                | 05 Flood Plain | 90                      | 90                      | 90                   |              |          |               |          |     |           |
| 06 SUBJECT DIMENSIONS                                |              | 07 SITE INFORMATION       |                  | 08 REMARKS        |                |                         |                         |                      |              |          |               |          |     |           |
| Frontage                                             |              | 01 Location P.F.A.G.E.    |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
| Depth                                                |              | 02 Amenities P.F.A.G.E.   |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
| Other                                                |              | 03 Landscaping P.F.A.G.E. |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|                                                      |              | 04 View P.F.A.G.E.        |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|                                                      |              | 05 Comments Few Many None |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|                                                      |              | 06 Zoned                  |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
| 09 COMPOSITE ADJUSTMENT                              |              | 10 SITE ADJUSTMENTS       |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
| CAT                                                  | LOC          | CLASS                     | TYPE             | UNIT              | QTY            | COST                    | BASE VALUE              | 01 Location          | 10 Access    | 20 View  | 30 Topography | 40 Water | QTY | EXT VALUE |
|                                                      |              |                           |                  |                   |                |                         |                         | 50 Depth             | 60 Pollution | 70 Beach | 80 Corner     | 90       |     |           |
|                                                      |              |                           |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|                                                      |              |                           |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
|                                                      |              |                           |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |
| APPRaiser _____ APPRAISAL DATE _____ REVIEW YR _____ |              |                           |                  |                   |                |                         | LAND VALUE \$           |                      |              |          |               |          |     |           |
| REINSPECTED APPR _____ DATE _____ REVIEW YR _____    |              |                           |                  |                   |                |                         |                         |                      |              |          |               |          |     |           |

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