

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

Claim ID: 95-17542

Date Received: 3/20/18

Receipt No: N033232

Claim Fee: \$250 By: JA

RECEIVED

MAR 20 2018

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

IDWR/NORTHERN

Please type or print clearly

1. Name of claimant(s) LORETO FAMILY TRUST Phone (208) 687-2010
Mailing address 13705 N DELTA LN RATHDRUM ID 83858
Street or Box City State Zip
Email address (optional) hacon22@gmail.com
2. Date of priority: (Only one per claim) 12/31/1970 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water () or Other (✓) (a) UNNAMED STREAM
which is tributary to (b) SINKS
4. a. Location of point of diversion is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, Govt. Lot _____, BM, County of _____
Parcel no. _____
Additional points of diversion, if any: _____
If available, GPS Coordinates _____
b. If instream flow, beginning point of claimed instream flow is:
Township 51N, Range 05W, Section 5, SW 1/4 of NE 1/4,
Govt. Lot _____, BM, County of KOOTENAI
Ending point is: Township 51N, Range 05W, Section 5, SW 1/4 of NE 1/4,
Govt. Lot _____, BM, County of KOOTENAI
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, 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.
INSTREAM STOCKWATER

- (dates are inclusive MM-DD) (cfs) (acre-feet)
- For STOCKWATER purposes from 1/1 to 12/31 amount 0.02 or _____
- For _____ purposes from _____ to _____ amount _____ or _____
- For _____ purposes from _____ to _____ amount _____ or _____
- For _____ purposes from _____ to _____ amount _____ or _____
7. Total quantity claimed (a) 0.02 (cfs) and/or (b) _____ (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) INSTREAM STOCKWATER USE FOR UP TO 10 HEAD MIXED STOCK

9. Description of place of use:
- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 - If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

[illegible]

Parcel no(s) 51N05W051580 Total number of acres irrigated _____

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

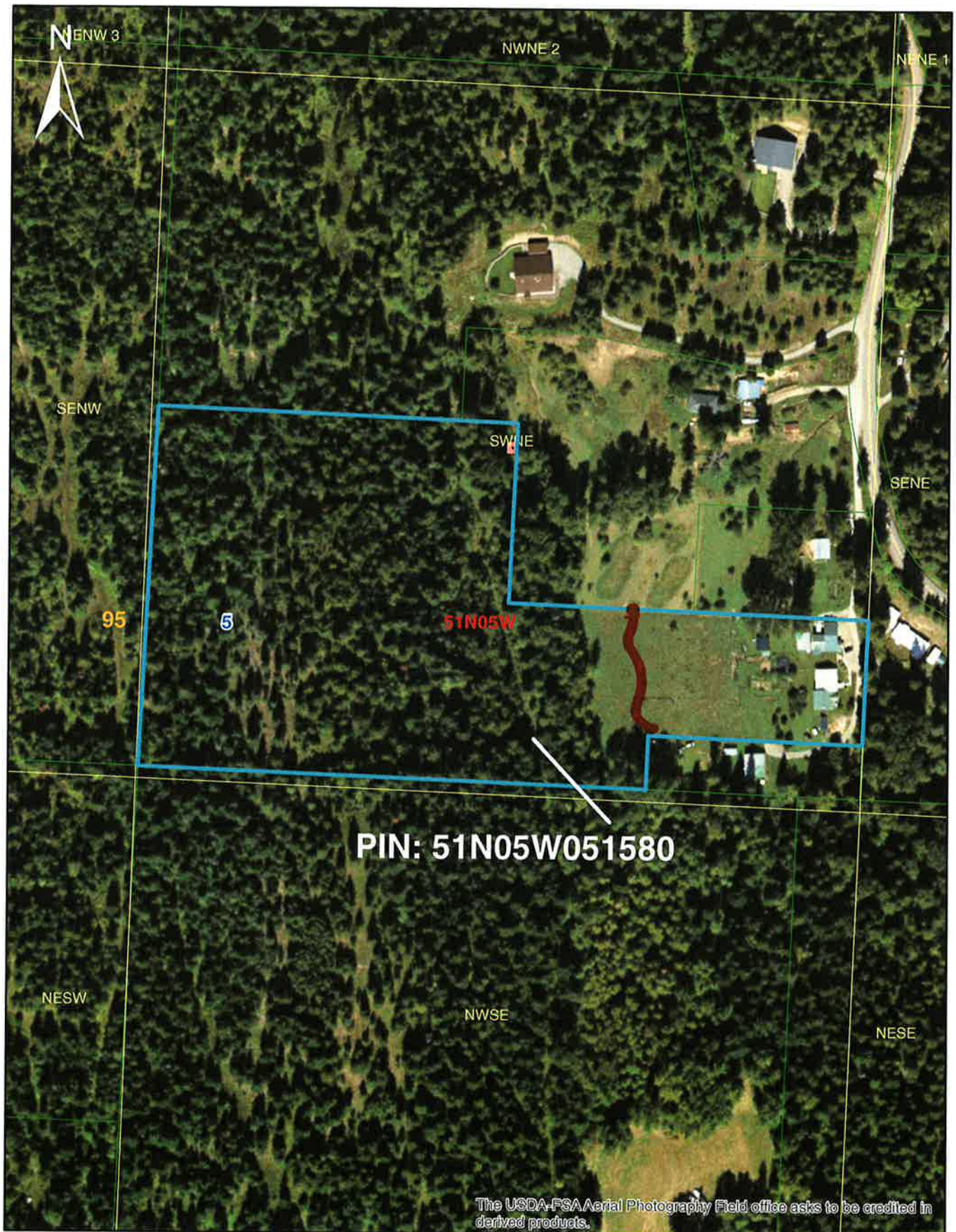
11. Do you own the property listed above as place of use? Yes (✓) No ()
If your answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
DOMESTIC USE FROM WELL _____ or None ()

13. Remarks (Include an explanation of the priority date selected):
YEAR BUILT AS PER KOOTENAI COUNTY RECORDS, WHEN STOCK FIRST ON PROPERTY

Name of claimant(s) LORETO FAMILY TRUST Claim ID _____

PARCEL LOCATION FOR CSRBA WATER RIGHT CLAIM



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 Water System 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: ¹ _____

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: _____

_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Trustee of Loreto Family Trust
Agent's title (Please print) Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Cornelius J. Strain Date March 20, 2018

Printed Name of Authorized Agent Cornelius J. Strain

16. **Notice of Appearance:**

Notice is hereby given that I, (please print) _____, will be acting as attorney at law on 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 _____

Name of claimant(s) LORETO FAMILY TRUST Claim ID _____

Identify

Identify from:
Taxlots

☐ Taxlots
☒ LORETO FAMILY TRUST

Location: 2,276,111.852 1,848,255.217 Meters

Field	Value
ID	8582096
UPDATED	10/18/2017
PIN	51N05W051580
OWNER	LORETO FAMILY TRUST
ADDRESS1	13705 N DELTA LN
ADDRESS2	<null>
CITY	RATHDRUM
STATE	ID
ZIPCODE	83858
P_ADDRESS	13705 N DELTA LN
P_ZIPCODE	<null>
SUB_NAME	
LEGAL1	S2-S2-SW-NE EX TAX #, N2-SW-SW-NE
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	14
COUNTY	Kootenai
SOURCE	<null>
YEAR_BUILT	1970

Identified 1 feature