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DEPARTMENT OF
WATER RESOURCES

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: 95-17676
Date Received: 11-28-18
Receipt No: C105916
Claim Fee: \$25
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)

ANDREW LECLAIRE
12111 W MELVILLE RD
CHENEY WA 99004

Phone: (509) 220-8504

2. Date of Priority: 07/01/1963

3. Source:

SPRING

Trib. to:

SINKS

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
49N	02W	5	NE SW		KOOTENAI	

5. Description of diverting works:

Spring fed pond.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S. (or)	A.F.A.
STOCKWATER	01/01	12/31	0.02	
STOCKWATER FROM STORAGE	01/01	12/31		2
STOCKWATER STORAGE	01/01	12/31		2

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or 2 A.F.A.

8. Non-irrigation uses:

9. Place of use:

STOCKWATER within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
49N	02W	5	NE		SW		

STOCKWATER STORAGE same as STOCKWATER
STOCKWATER FROM STORAGE same as STOCKWATER

10. Do you own the property listed above as place of use? 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:

Priority Date Explanation: Pond was constructed under the USDA Agriculture Conservation Program. The pond was to be completed and reported by July 1, 1963.

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: 0

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): *A. G. S.* Date: 11/24/18

Date: _____