## 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: 95-17744
Date Received: 12-24-18
Receipt No: N033971
Claim Fee: 2500 By: Ja

RECEIVED DEC 24 2013

## 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

Please to	pe or print	clearly
	CONTRACTOR OF THE PARTY OF THE	OIGGILL

1.	Name of claimant(s) ERIK OR CAROL KARBER	Phone (_208_) 245-7187					
	Mailing address 2623 BENEWAH CREEK RD ST MARIES	ID Zip 83861					
	Street or Box City Email address (optional)	State					
2.	2. Date of priority: (Only one per claim)6/10/1996 (E	explain priority date selected in Remarks)					
3.	3. Source of water supply (Check one) $\underline{\text{Ground Water}}$ ( $\checkmark$ ) or Other ( ) (	(a)					
	which is tributary to (b)						
4.	4. Location of point of diversion is: Township46N, Range	03W Section 22					
	SE1/4 ofSE1/4, or Govt. LotBM, Count	ty of BENEWAH					
	Parcel no. RP46N03W229001A						
	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.  WELL, PUMP AND PIPELINE TO HOME						
6.	Month/Day	Month/Day cfs (✓) or AFY ( )					
	For DOMESTIC purposes from1/1						
	For purposes from	to amount					
7.	7. Total quantity claimed cfs ( ) or AFY ( )</td <td></td>						
8.	Non-irrigation uses. Describe fully. (Domestic: give number of home 1 HOME	es; Stockwater: list number and kind)					

9.	Location of place of use is: Township 46N, Range 33W, Section 22,					
	NE 1/4 of SE 1/4, Govt. Lot BM, Parcel no. RP46N03W22720EA					
	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 ( \( \strict{\chi} \)					
13. Remarks (include an explanation of the priority date selected): SHARED WELL WITH 95-17065						
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.	<ul> <li>Signature(s)</li> <li>(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."</li> <li>(b.) I/We do ( ) do not (x) wish to receive and pay a small annual fee for monthly copies of the docket sheet.</li> </ul>					
	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)  Date: 12-21-18  Date: 12-31-18					
	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					
	Agent's title (Please print) Of Name of organization (Please print)					
	and that the statements contained in the foregoing document are true and correct.					
	Signature of Authorized Agent Date					
	Printed Name of Authorized Agent					
16.	Notice of Appearance:  Notice is hereby given that I, (please print), will be acting as attorney at law of behalf on 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					
Nar	ne of claimant(s) ERIK OR CAROL KARBER					

## ST. MARIES CONCRETE CO. INC.

Phone 245-2121

Jack W. Harold Rt. 3, Box 49 St. Joe Rd. St. Marles, Idaho 83861

8279

Addre	SS				
owner, non-pa nished. Terms: counts scribed name charges comes ing cha	be used at the delivery address as shown or agent of the owner, and hereby accept yment a lien may be claimed for all mat ALL claims and returned goods MUST b A FINANCE CHARGE of 1 1/2% will be This is an ANNUAL RATE of 18%. Title, and any additions or substitutions, shuntil paid in full and the purchaser age and costs, including a reasonable attorn necessary for seller to place this account free on all returned merchandise.  kke deliveries inside the curb line at curo or responsibility whatsoever for damages.	tabove and this notice erials and sue accompanies applied to a to the prope all remain incress to pay ey's fee in the collection	that I am the that in case of upplies so fur ed by this bill ill past due acerty herein de in the seller's all expenses ne event it be . 10% restock		
YOUR	PRDER NO CASH CHG. C.O.D. DATE	9-16	7-96		
QUAN.	DESCRIPTION	PRICE	AMOUNT		
14	TOTAL YDS CONCRETE/SK 5	7400			
	YARDS SAND - GRAVEL COO A	200			
	SACKS CEMENT	2200.	\$10080		
	POZZOLITH	/ -	1000		
	CALCIUM CHLORIDE				
	REBAR KIN				
	WATER - PLANT				
	WATER - SITE				
	WAITING TIME				
	TRUCK FEE 200				
		hw 2014			
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		TAX			

FREE LOADING TIME: TEN MINUTES PER CUBIC YARD OF CONCRETE CHARGE TIME THEREAFTER \$50.00 PER HOUR TERMS: DUE AND PAYABLE 10TH PROX.

Gazette Record Prin



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