SEP 2 9 2025 IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO. IN AND FOR THE COUNTY OF TWIN FALLS BY

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 Deputy Clerk

Ident. Number:

95-18707

Date Received:

9/25/2025

Receipt No:

Claim Fee:

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)

STEPHEN AVERY REDD 1451 W SEASONS RD **ATHOL ID 83801**

Phone: (626) 252-6119

IRENE ROBERTA REDD 1451 W SEASONS RD **ATHOL ID 83801**

Phone:

2. Date of Priority:

7/6/2022

3. Source:

Trib. to:

GROUND WATER

4. Point of Diversion:

53N

Township Range Section

22

% of % of % SW SW Lot

County **KOOTENAI** Type

5. Description of diverting works:

04W

SHARED WELL WITH PUMP TO HOME

6. Water is used for the following purposes:

Purpose

From

To

C.F.S.

(or) A.F.A

DOMESTIC

01/01

12/31

0.06

7. Total Quantity Appropriated is:

0.06 C.F.S. and/or A.F.A.

| 8. Non-irrigation uses: |
|--|
| DOMESTIC FOR ONE HOME |
| 9. Place of use: |
| DOMESTIC within KOOTENAI County |
| Township Range Section ¼ of ¼ Lot Acres 53N 04W 22 SW SW |
| 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: |
| DATE WELL WAS CONNECTED TO HOME AND FIRST USED |
| |
| 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 notX_ 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): Date: 9-25-202 |
| Signature of Claimant(s): Date: 9-25-202 |

95-18707