## 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: 95-17055

Received By: N031455 - 8-19-15

## NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED

UNDER STATE LAW								
1. Name of Claims	ant(s)							
SEEDS INC PO BOX 866 TEKOA WA 99 2. Date of Priority		50					RECEIVED AUG 1 9 2015	
3. Source: GROUND WATER		Tributary to:						
4. Point of Diversion:		-				IDWR/NORTHERN		
	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type	·	
48N	05W	29	SW SE		KOOTENAI			
5. Description of diverting works:								
6; Water is used for the following purposes:								
Purpose		E	rom To	C.F.S.	(or) A.F.A			
DOMESTIC		C	1/01 12/31	0.01				
7. Total Quantity Appropriated is: 0.01 C.F.S. and/or A.F.A								
8. Non-irrigation uses:								
Number of Homes: 1 Water Use		Type Of Stock N		Number C	of Stock			
9. Place of use:								
Township	Range	Section	1/4 of 1/4	Lot	<u>Use</u>		<u>Acres</u>	
48N	05W	29	SW SE		DOMESTIC			
					Section Acre	es		
						Total Acres		
10. Place of use in counties: KOOTENAI  11. Do you own the property listed above as place of use? Yes								
12. Other Water Rights Used:								
13. Remarks:								
Priority date description: Tax lot year built 1950								

Description of use:	Water Use		Description	13,000 gallone per day					
	DOMESTIC	1	Home	13,000 garden processing					
14. Basis of Claim: Be	neficial Use								
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 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.  For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.									
Signature of Claimant(s	s):			Date:					
				Date:					
For Organizations: I do solemnly swear or affirm under penalty or perjury that I am  MANAGE  of Seeds Inc.  Organization									
That I have signed the	foregoing document in the space be	gani	as Seeds zation	Inc.					
Signature of Authorized Title and Organization	d Agent Parous n	ent a	re true and co	Date: 8-1415 Pal Inc Manager					