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:

95-17273

Date Received:

3/29/2010

Receipt No: Claim Fee: Received By:

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

PETER STANTON PO BOX 2191 SPOKANE WA 99210

Phone: (509)353-3939

2. Date of Priority:

10/3/2006

3. Source:

Trib. to:

COEUR D ALENE LAKE

SPOKANE RIVER

4. Point of Diversion:

Township Range Section 48N 04W 10

% of % of % NW SW Lot County KOOTENAI Type

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose IRRIGATION

From 3 /15

To 11/15 C.F.S. 0.01 (or) A.F.A 1.5

7. Total Quantity Appropriated is:

0.01 C.F.S. and/or 1.5 A.F.A.

8. Non-irrigation uses:

J.	Place of use:						
	IRRIGATION within KOOTENAI County						
	Township Range Section ¼ of ¼ Lot Acres 48N 04W 10 NW SW 3 0.4						
	Total Acres = 0.4						
LO.	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.						
l 1 .	Other Water Rights Used:						
L2.	2. Remarks and Priority Date Explanation:						
	This right is a split from former right 95-9370.						
l3.	. Basis of Claim: License						
l4.	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 formonthly 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:						

Date:

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: 95-9370 95-17273

Date Received: 3/29/2010

Receipt No: T090423

Received By:

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

PETER STANTON

PO BOX 2191

SPOKANE WA 99210

2. Date of Priority:

3. Source:

10/3/2006

COEUR D ALENE LAKE

Tributary to:

SPOKANE RIVER

4. Point of Diversion:

<u>Township</u>	Range	<u>Section</u>	1/4 of 1/4 of 1/4	Lot	County	Type
48N	04W	10	NW SW	3	KOOTENAI	
48N	04W	10	NW SW	3	KOOTENAI	

- 5. Description of diverting works:
- 6: Water is used for the following purposes:

Purpose

From To

C.F.S.

(or).A.F.A

IRRIGATION

3 /15 11/15

0.03

3

- 7. Total Quantity Appropriated is:
- 0.03 C.F.S. and/or 3 A.F.A
- 8. Non-irrigation uses:
- 9. Place of use:

<u>Township</u>	Range	Section	<u>1/4_o</u>	<u> 1/4</u>	Lot	<u>Use</u>	<u>Acres</u>
48N	04W	10	NW	sw	3	IRRIGATION	1
						Section Acres	1

Total Acres 1

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:

95-9370

5/21/2012

Description of use:	Water Use	Description				
	IRRIGATION	Seasonal irrigation				
14. Basis of Claim: Lice	ense					
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.						
		Date:				
	-	Date:				
For Organizations: I do solemnly swear or affirm under penalty or perjury that I am						
	Title of Organization					
Title	Title Organization					
That I have signed the foregoing document in the space below as						
Title	of					
Title Organization						
and that the statements contained in the foregoing document are true and correct.						
Signature of Authorized	Agent	Date:				

95-9370

Title and Organization _

Please print name