

**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: 95-17564

Date Received: 5-17-18

Receipt No: N033412

Claim Fee: 25.00 By: ja

**RECEIVED**

**MAY 17 2018**

**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**

**IDWR / NORTH**

**Please type or print clearly**

(208) 383-3954 (counsel)

1. Name of claimant(s) Essential Oil Research Farm, LLC Phone ( 801 ) 221-6160

Mailing address 3125 W. Executive Parkway Lehi UT Zip 84043  
Street or Box City State

Email address (optional) \_\_\_\_\_

2. Date of priority: (Only one per claim) 1/30/1973 (Explain priority date selected in Remarks)  
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (✓) or Other ( ) (a) \_\_\_\_\_

which is tributary to (b) \_\_\_\_\_

4. Location of point of diversion is: Township 46N, Range 3W, Section 28,

SW 1/4 of NW 1/4, or Govt. Lot \_\_\_\_\_ BM, County of Benewah;

Parcel no. RP46N03W284700A

Additional points of diversion, if any: \_\_\_\_\_

If available, GPS coordinates: 47.305269, -116.730742

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 and pump

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For \_\_\_\_\_ domestic purposes from 1/1 Month/Day to 12/31 Month/Day amount 0.04 cfs (✓) or AFY ( )

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

7. Total quantity claimed 0.04 cfs (✓) or AFY ( )

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)  
1 single-family home

9. Location of place of use is: Township 46N, Range 3W, Section 28,  
SW 1/4 of NW 1/4, Govt. Lot \_\_\_\_\_ BM, Parcel no. \_\_\_\_\_  
If different than shown in Item 4  
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 (✓)

13. Remarks (include an explanation of the priority date selected):  
The date of priority is based on the Well Driller's Report (Permit No. 95-73-N-62)

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. **Signature(s)**  
(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."  
(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: 2

**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: \_\_\_\_\_

**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

Associate General Counsel of Essential Oil Research Farm, LLC,  
Agent's title (Please print) Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Nicolas Wenker Date 5-7-18

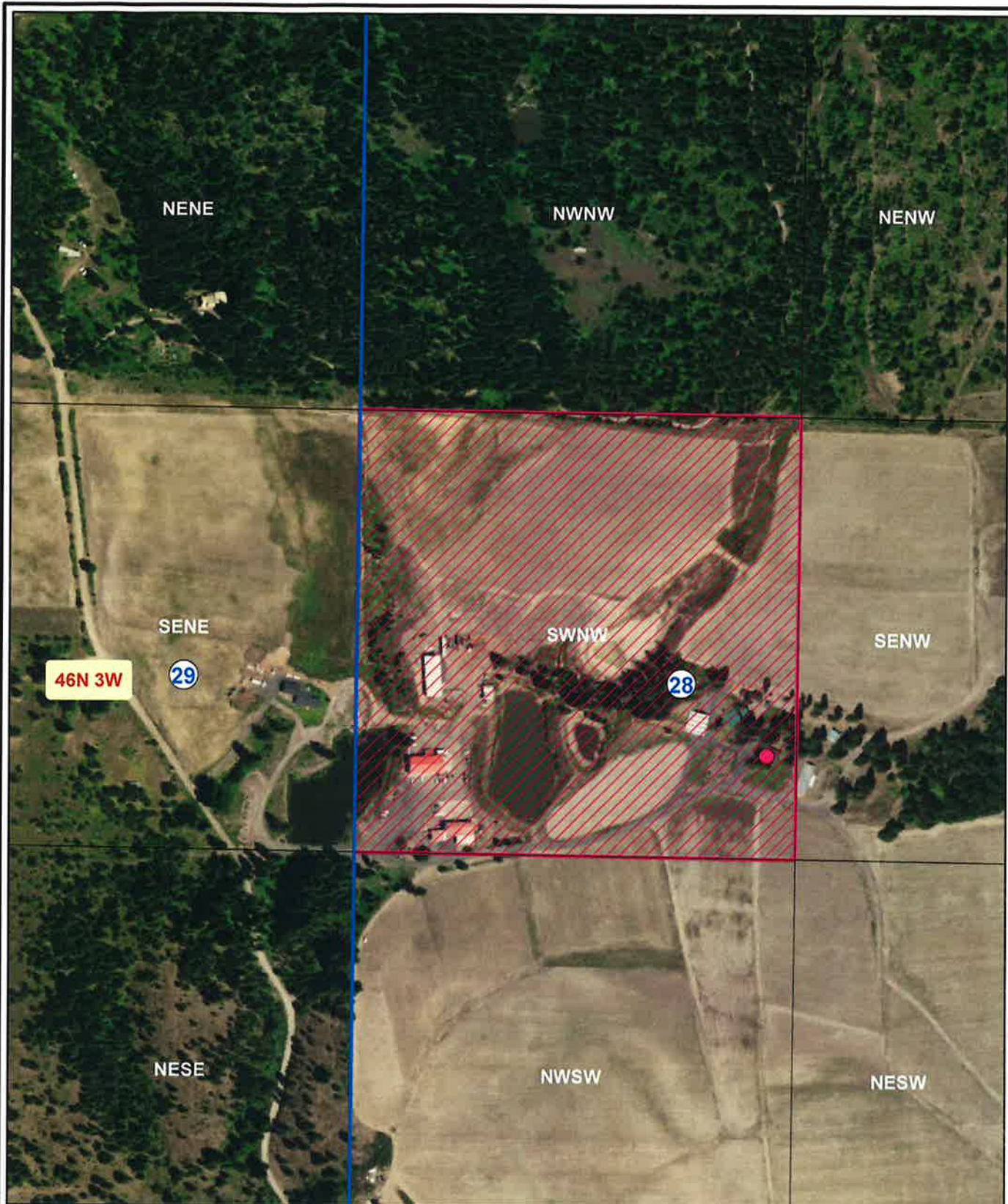
Printed Name of Authorized Agent Nicolas Wenker

16. **Notice of Appearance:**  
Notice is hereby given that I, (please print) William G. Myers III, 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 W. G. Myers III Date May 14, 2018

Address 800 W. Main Street, Suite 1750, Boise, Idaho 83702

Name of claimant(s) Essential Oil Research Farm, LLC Claim ID \_\_\_\_\_



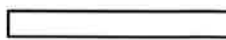
● Point of Diversion (Well 4)

 Place of Use (Gary's House)

### Adjudication Claim for Domestic Use Essential Oil Research Farm, LLC

N  
↑

500

 Feet





## WELL DRILLER'S REPORT

State law requires that this report be filed with the State Reclamation Engineer within 30 days after completion or abandonment of the well.

[illegible]