## 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: 95-17605 Date Received: 7/30/2018

Receipt No: No33627 + No33628

Claim Fee: 🐧 101.00 Received By:

Phone: (602) 549-7777

## NOTICE OF CLAIM TO A WATER RIGHT **ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

PIERCE FAMILY TRUST

7530 N SHADOW MOUNTAIN RD

PARADIS VALLEY AZ 85253

Mitchell Pierce Trustee

2. Date of Priority: 5/20/1956

3. Source: Trib. to:

COEUR D ALENE LAKE SPOKANE RIVER

4. Point of Diversion:

Township Range Section ¼ of ¼ of ¼ Lot County Type 04W NW NW 1 KOOTENAL

5. Description of diverting works:

pump, pipeline to cistern, pipeline to home and lawn irrigation

6. Water is used for the following purposes:

**Purpose** From To C.F.S. (or) A.F.A **DOMESTIC** 01/01 12/31 0.04 **IRRIGATION** 03/15 11/15 0.03

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses: 1 Home, 2 cabins - Cabins have sink, Zoilet & shower - family usage

95-17605 1 one home and two cabins, two cabins have shower, sink and toilet

	one nome and two	o cabilis,	two capins	ilave.	21101	vci, 5	IIIN AII	iu tollet					
9. F	Place of use:												
	DOMESTIC within KOOTENAI County												
	Township 49N	Range 04W	Section 1	¼ SW	of	¼ SW	Lot	Acres					
	IRRIGATION within KOOTENAI County												
	Township 49N	Range 04W	Section 1	¼ SW	of	¼ SW	Lot	Acres 0.5					
	49N	04W	1	SE		SW	7	0.5					
	Total Acres = 1												
10	Do you own the pr	t- 12			,								
10.													
	If your answer is r	ity you have to claim this water right.											
	<del>-</del>												
	<del></del>				-								
11.	Other Water Rights Used: None												
12.	Remarks:												
	Priority Date Expla	anation:											
13.	Basis of Claim: Ber	neficial U	se										
14.	Signature(s)												
	form entitled '	'How you (b.) I/W	u will recei e do <u>X</u>	ve not do no	ice iı	n the	COEU	ove received, read and understand the JR D'ALENE-SPOKANE River Basin o receive and pay a small annual fee for					
	Number of atta	achments	s:			==:							
	For Organizations	<b>3:</b>											

95-17605

I do solemnly swear or affirm under penalty of perjury that I am

Trustee	of	Pierce	Family	Trust							
Title	8 8		Organization								
that I have signed the foregoing document in the space below as											
Trustee	of	Pierce	Family	Trust							
Title	) <del>(==</del>	•	Organization								
and that the statements contained in the foregoing document are true and correct.											
Signature of Authorized Agent Date 7/30/18											
Title and Organization Trustee F	ierce	Fami	4 Trust	_							

95-17605

