

SEP 18 2015

DEPARTMENT OF
WATER RESOURCES

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 94-9433
Date Received: 8/28/2015
Receipt No: C100942
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

DONNA J DAVIS Phone: (208) 744-1279
PO BOX 453
MULLAN ID USA 83846

KENT L DAVIS Phone: (208) 744-1279
PO BOX 453
MULLAN ID USA 83846

2. Date of Priority: 06/29/1984

3. Source: SPRING Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
48N	05E	35	NW SE	SHOSHONE	

5. Description of diverting works:

Spring serves two homes.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1	/1 12/31	0.04	

7. Total Quantity Appropriated is:

0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	05E	35	SE NW	6	DOMESTIC	

11. Place of use in counties: SHOSHONE

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

Spring also provides water for 94-7108. This claim is an enlargement of license 94-7108 as an enlargement right for additional home.

15. Basis of Claim: Beneficial Use

16. 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.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Kent J. Davis Date: 9/11/15
Donna J. Davis Date: 9/11/15

AUG 28 2015

DEPARTMENT OF WATER RESOURCES

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 94-2108 9433

Date Received: 8-28-15

Receipt No: C10942

Received By: dj

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) Kent and/or Donna Davis Phone (208) 744-1279

Mailing Address PO Box 453 Street or Box Mullan ID City State Zip 83846

2. Date of Priority: (Only one per claim) 6-29-1984 Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (X) (a) Spring which is tributary to (b) sinks

4. Location of Point of Diversion is: Township 48N, Range 5E, Section 35, NW 1/4 of SE 1/4, or Govt. Lot BM. County of Shoshone

Parcel (PIN) no.

Additional points of diversion if any:

If available, GPS coordinates:

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. Spring serves 2 homes

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 to 12-31 amount .04 cfs (X) or AFY ()

For purposes from to amount

7. Total Quantity claimed .04 cfs (X) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 Home

9. Location of Place of Use is: Township 48N, Range 5E, Section 35,
SE 1/4 of SE 1/4, Govt. Lot 6 BM. Parcel (PIN) 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? Shoshone

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.
Spring also provides water for 94-7108 or None

13. Remarks: This claim is an enlargement of license 94-7108 as an enlargement right for additional home

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 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: _____

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
_____ of _____,
Title Organization
that I have signed the foregoing document in the space below as
_____ of _____,
Title Organization
and that the statements contained in the forgoing document are true and correct.

Signature of Authorized Agent _____ Date _____
Title and Organization _____

16. Notice of Appearance:
Notice is hereby given that I, _____, will be acting as attorney at law of behalf of 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 _____ Date _____

Address _____

Last Name _____ Identification No. _____

Idaho Department of Water Resources Receipt

Receipt ID: C100942

Payment Amount \$25.00 Date Received 8/28/2015 10:49 AM Region STATE

Payment Type Check Check Number 1395

Payer DAVIS, K L / DAVIS, D J

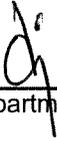
Comments NOTICE OF CLAIM TO A WATER RIGHT FOR 94-7108 FOR KENT DAVIS AND/OR DONNA DAVIS

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$25.00	NORTHERN ID ADJUDICATION FILING FEE	75503	0337	1		1155

Water Rights

Basin	Sequence	Split	Suffix
94	7108		



Signature Line (Department Representative)