

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
RECEIVED

CIVIL CASE NUMBER: 49576

Ident. Number 95-14096

Date Received: 3-17-11

Receipt No: N026765

Received By: ew

MAY 03 2010

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

IDWR / NORTH

Please type or print clearly

1. Name of Claimant (s) Gregory B Nye Phone 760 641-3365
Mailing Address 7640 S GREENSFERRY RD. COA ID ZIP 83814
Street or Box City State
2. Date of Priority (Only one (1) per claim) MAY 01 2008 DATE BOUGHT PROPERTY
Month Day Year (YYYY)
3. Source of water supply (Check one) Ground Water (☒) or Other () (a) _____
which is tributary to (b) _____
4. a. Location of Point of Diversion is: Township 50N, Range 04W, Section 30,
_____, 1/4 of _____, 1/4 Govt. Lot _____, BM., County of KOOTENAI
Parcel (PIN) no. _____
Additional points of diversion if any: _____
If available, GPS Coordinates _____
- b. If instream flow, beginning point of claimed instream flow is:
Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4
Govt. Lot _____, BM., County of _____
ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4
Govt. Lot _____, BM., County of _____
5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. _____
THIS WELL PUMPS TO A HOLDING TANK OF 3000 GALS
(the well is 400yds approx from the tank) IF I REMEMBER
THE WELL PUMPS AT 6 GALS A MINUTE.

SCANNED

MAY - 3 2010

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For IRRIGATION purposes from MAY to OCT amount 0.03 or _____

For DOMESTIC purposes from MAY to OCT amount 0.02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.35 (cfs) and/or (b) _____ (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) WE HAVE NO LIVESTOCK

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
<u>50N</u>	<u>04W</u>	<u>30</u>																	

Parcel (PIN) no(s) _____

Total number of acres irrigated less than 1/2

10. In which county (ies) are lands listed above as place of use located? KOOTENAI

11. Do you own the property listed above as place of use? Yes (☒) No ()

If your 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: This is the present usage however the parcel is 12 acres and at the moment we are only watering 1/2 acres and domestic use for only summer crops. We are not in residence during the winter. In the future we could be there all year, if that were so our water usage would go up. We have also cleared some trees where a water system could be installed for irrigation

Last Name

Nye

Identification No.

95-14096

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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: 4/27/2010

_____ 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 foregoing 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

NYE

Identification No.

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