

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: 91-7369

Date Received: 6/3/2011

Receipt No: N027459

Received By:

RECEIVED

OCT - 3 2012

IDWR/NORTHERN

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

AMENDED TO CLAIM
(SR)

1. Name of Claimant(s)

STEVEN REIDHAAR Phone:(208) 869-3030
2710 GOOSEHAVEN ROAD
ST MARIES ID 83861

2. Date of Priority: ~~5/11/1984~~ 9/15/2000 (SR)

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
46N	03W	2	NE NE	8	BENEWAH	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From To	C.F.S.	(or) A.F.A
DOMESTIC	1 /1 12/31	0.02 .04	0 (SR)

7. Total Quantity Appropriated is: 0.02 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses: .04 (SR)

Number of Homes: 1	Water Use	Type Of Stock	Number Of Stock
--------------------	-----------	---------------	-----------------

9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	03W	2	NE NE	8	DOMESTIC	

Section Acres

Total Acres

10. Place of use in counties: BENEWAH

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

12. Other Water Rights Used:

13. Remarks:

Priority date description: Spring water used since 1964. Well drilled in 2000.

91-7369

10/21/2011

SCANNED
OCT 04 2012

Description of use: Water Use

Description

DOMESTIC

14. Basis of Claim: Beneficial Use

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.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty or 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 _____

Please print name

SCANNED
OCT 04 2012