

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: 95-7117

Date Received: 4/4/2013

Received By: *Chad*

NO29724 \$94.00

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

MC GUIRE ESTATES WATER Phone:(208)457-9597
USERS ASSN INC
2037 W CANNON
POST FALLS ID 83854

2. Date of Priority: 6/16/1970

3. Source: GROUND WATER

Tributary to:

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
50N	05W	4	SE NW		KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
MUNICIPAL	01/01 12/31	0.44	66

7. Total Quantity Appropriated is: 0.44 C.F.S. and/or 66 A.F.A

8. Non-irrigation uses:

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
50N	05W	4	SW NW		MUNICIPAL	
			SE NW		MUNICIPAL	
			NE SW		MUNICIPAL	
			NE SW	6	MUNICIPAL	
			NW SW		MUNICIPAL	

Section Acres

Total Acres

10. Place of use in counties: KOOTENAI

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

12. Other Water Rights Used:

95-7117

4/4/2013

RECEIVED

APR 04 2013

IDWR / NORTH

13. Remarks:

Priority date description:

Description of use: Water Use Description

MUNICIPAL

REINSTATED 8-15-1975.

14. Basis of Claim: License

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 Bob Eatherton Date: 4-4-13

Title and Organization President McGuire Est. Water Users Ass. INC.
Please print name

