



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 94-7988Date Received: Jan 14, 2011Receipt No: N0120440Received By: N Stender

RECEIVED

JAN 14 2011

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

IDWR / NORTH

1. Name of Claimant(s) C. Scott Green and Gabriella M. Green, husband and wife Phone (208) 667-0100

Mailing Address c/o John F. Magnuson, Attorney, P.O. Box 2350 Coeur d'Alene ID Zip 83816
Street or Box City State

2. Date of Priority: (Only one per claim) May 1, 1960
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 47 N, Range 3 W, Section 29,
____ 1/4 of ____ 1/4, or Govt. Lot 2 BM. County of Kootenai;
Parcel (PIN) no. 47N03W291300

Additional points of diversion if any: N/AIf available, GPS coordinates: N/A

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.
Please see addendum hereto.

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 .04cfs cfs (✓) or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed _____ cfs () or AFY ()

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

Stockwater and Number of livestock) Single household and landscape are of less than a half acre in size.

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9. Location of Place of Use is: Township 47 N, Range 3 W, Section 29,
-- 1/4 of -- 1/4, Govt. Lot 2 BM. Parcel (PIN) no. 47N03W291300
If different than shown in Item 4
for (Check One) **Domestic** (✓) **Stock** () **Domestic and Stock** ()

Additional places of use, if any N/A

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 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.

_____ or None (✓)

13. Remarks:
N/A

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 Please see addendum.

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: 3

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) John F. Magnuson Date: 1/12/11
Attorney In Fact 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 John F. Magnuson Date 1/12/11

Title and Organization John F. Magnuson, Attorney-in-Fact

16. Notice of Appearance:

Notice is hereby given that I, John F. Magnuson, 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 John F. Magnuson Date 1/12/11

Address P.O. Box 2350, Coeur d'Alene, ID 83816

Last Name Magnuson Identification No. ISBA #4270

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