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OCT 24 2013

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: 91-7135

Date Received: 4/1/2011

Receipt No: N026844, C 097901

AMENDED

Received By:

**NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW**

1. Name of Claimant(s)

DANIEL BARDEN Phone:(208) 245-5034
94 GRACIE LN
SAINT MARIES ID 83861-2310

2. Date of Priority: 4/17/1996

3. Source: ST JOE RIVER Tributary to: COEUR D ALENE LAKE

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
46N	02W	14	SW SW		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	01/01 12/31	0.06	1.2
IRRIGATION	03/15 11/15	0.03	3

7. Total Quantity Appropriated is: 0.06 C.F.S. and/or 4.2 A.F.A

8. Non-irrigation uses:

Number of Homes: 2	Water Use	Type Of Stock	Number Of Stock
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9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	02W	14	SW SW	10	DOMESTIC	
						Section Acres

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	02W	14	SW SW	10	IRRIGATION	1
						Section Acres

Total Acres 1

10. Place of use in counties: BENEWAH

91-7135

9/24/2013

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

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use: Water Use Description
DOMESTIC
IRRIGATION

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): Daniel J. Bardene Date: 10/20/2013
Nehia G. Bardene 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

