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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: 95-2091
Date Received: 04/02/2013 *fm*
Receipt No.: N029715

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
E. LLOYD REITMEIER, E	840 S CARPENTER LOOP	POST FALLS	ID	USA	83854

2. Date of Priority:

Date	Explanation
11/27/1950	

3. Source:

Source	Tributary	Type
SKALAN CREEK	SPOKANE RIVER	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
50N	05W	18		NW	NE	KOOTENAI

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock		Description
IRRIGATION	-	-		20 ACRES IRRIGATION
STOCKWATER	-	Type of Stock	Number of Stock	18 CATTLE 4 HORSES
		Mixed Stock	11 - 25	

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	3 / 15	11 / 15
STOCKWATER	1 / 1	12 / 31

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7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	0.500	60.00	0.0
STOCKWATER	0.020	0.60	0.0

Totals:

CFS	AF	KW
0.500	60.00	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	20

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
IRRIGATION	50N	05W	18	NE	NE	KOOTENAI	-	3.3
IRRIGATION	50N	05W	18	NW	NE	KOOTENAI	-	18
STOCKWATER	50N	05W	18	NW	NE	KOOTENAI	-	-

9. Basis of Claim:

Basis	WaterRight
License	95-2091

10. 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.

Number of attachments: 0

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): [Signature] Date: 4-2-13

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 _____

SCANNED

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