

DISTRICT COURT - SRBA  
Fifth Judicial District  
County of Twin Falls - State of Idaho

DEC 18 2013

By \_\_\_\_\_  
\_\_\_\_\_  
Clerk  
Deputy Clerk

**CERTIFICATE OF MAILING**

I certify that a true and correct copy of the ORDER GRANTING  
MOTIONS TO FILE LATE NOTICE OF CLAIMS was mailed on December  
18, 2013, with sufficient first-class postage to the following:

DIRECTOR OF IDWR  
PO BOX 83720  
BOISE, ID 83720-0098

JAMES R CIARDELLI  
NANCY WHITE  
PO BOX 877  
EMMETT, ID 83617  
Phone: 208-365-3593

A handwritten signature in cursive script, reading "Julie Murphy", is written over a horizontal line. The signature is in dark ink and is positioned to the right of the printed text "Deputy Clerk".

RECEIVED

DEC 19 2013

DEPARTMENT OF  
WATER RESOURCES

SRBA Form No. 42-1409-2 (Internet 1/09)

DISTRICT COURT - SRBA  
Fifth Judicial District  
County Twin Falls - State of Idaho

SEP - 6 2013

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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 65-23555

Date Received: 12-19-13

Receipt No: C098084

Received By: P

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

1. Name of Claimant(s) James R. Cardelli and Nancy White Phone (208) 365-3593

Mailing Address P.O. Box 877 Emmett ID Zip 83617  
Street or Box City State

2. Date of Priority: (Only one per claim) 12/02/2003  
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 7N, Range 1W, Section 16,  
SE 1/4 of SE 1/4, or Govt. Lot \_\_\_\_\_ BM., County of Gem;  
Parcel (PIN) no. RP00420834

Additional points of diversion if any: \_\_\_\_\_

If available, GPS coordinates: \_\_\_\_\_

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.

Well, submersible pump, pipe to pressure tank, then distributed throughout  
home and yard.

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 0.04 cfs ☒ or AFY ☐

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

7. Total Quantity claimed 0.04 cfs ☒ or AFY ☐

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

Stockwater and Number of livestock) Domestic - 1 residence/household

9. Location of Place of Use is: Township 7N, Range 1W, Section 16,  
SE 1/4 of SE 1/4, Govt. Lot \_\_\_\_\_ BM. Parcel (PIN) no. \_\_\_\_\_  
If different than shown in Item 4  
for (Check One) Domestic ☒ Stock ☐ Domestic and Stock ☐

Additional places of use, if any \_\_\_\_\_

10. In which county (ies) are lands listed above as place of use located? Gem

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.

None ( ) \_\_\_\_\_

13. Remarks:

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 \_\_\_\_\_

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 Snake River Basin Adjudication." (b.) I/We do ☐ wish to receive do not ☒ and pay a small annual fee for monthly copies of the docket sheet

Number of attachments: \_\_\_\_\_

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) James R. Cardell Date: 9/3/13

Nancy White Date: 9/3/13

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 \_\_\_\_\_

Title and Organization \_\_\_\_\_

16. Notice of Appearance:

Notice is hereby given that I, \_\_\_\_\_, 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 \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Last Name \_\_\_\_\_ Identification No. \_\_\_\_\_