

Amended
Claim 6/13/2013

RECEIVED
JUN 14 2013
IDWR / NORTH

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: 94-8491

Date Received: 10/14/2011

Receipt No: T094132

Received By:

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

JUDITH ALMQUIST TRUST Phone: (208) 661-1829
PO BOX 1458
HAYDEN ID 83835

2. Date of Priority: 7/4/1974

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
50N	04E	32	NWNE	2	SHOSHONE	gaa

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From To	C.F.S.	(or) A.F.A
DOMESTIC	11-12/31 4/1-12/31	.04 0.04	0 gaa

7. Total Quantity Appropriated is: .04 C.F.S. and/or 0 A.F.A.

8. Non-irrigation uses:

Number of Homes: 1	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
50N	04E	32	NWNE	2	DOMESTIC	
						Section Acres
						Total Acres

10. Place of use in counties: SHOSHONE

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

12. Other Water Rights Used:

13. Remarks:

Priority date description: This is close to the date we acquired this property.

Purchased property 1974. I have no
Knowledge when the
well was created.

94-8491

7/5/2012

SCANNED

JUN 14 2013

Amended
Claim Judith A. Ahnquist
6/13/2013

Description of use: Water Use

Description

DOMESTIC

Drinking, bathing, cooking, plant irrigation, toilets, cleaning, prep work.

14. Basis of Claim: Beneficial Use

15. Signature(s)

Judith Ahnquist, Trustee

(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):

Judith Ahnquist

Date: 6/13/2013

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

SCANNED
JUN 14 2013