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IDWR/NORTHERN

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF
TWIN FALLSIN 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: 92-10382

Date Received: 6/2/2011

Receipt No: T093276

Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

Melissa Bell
137 Our Road
St. Maries,
ID 83861
THOMAS SLUGHER

15410 TERRA RIDGE CIRCLE

COLORADO SPRINGS CO 80908

phone (719) 337-1976

2. Date of Priority: 2/13/1975

3. Source: GROUND WATER

Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
46N	02W	33	NW NW		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	0.01	.04 M.B.

7. Total Quantity Appropriated is: 0.01 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

Number of Homes: 1	Water Use	Type Of Stock	Number Of Stock

9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	02W	33	NW NE		DOMESTIC	
Section Acres						
Total Acres						

10. Place of use in counties: BENEWAH

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 the approximate date the well was dug.

92-10382

7/15/2014

Description of use: Water Use

Description

DOMESTIC

Drinking, showering, washing, toilet, etc.

14. Basis of Claim: Beneficial Use

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): Melissa S. Bell Date: 21 July 2014

Date: _____

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

Title of Organization

That I have signed the foregoing document in the space below as

Title of 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