

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 94-9081
Date Received: 3/8/2012
Receipt No: N025548
Received By:

RECEIVED

APR - 2 2015

IDWR/NORTHERN

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

1. Name of Claimant(s)

THOMAS HOILAND Phone: (509) 234-0036

1196 W MUSE
CONNELL WA USA 99326

ROBERTA HOILAND Phone: (509) 234-0036

deceased TH
1196 W MUSE
CONNELL WA USA 99326

*Laurie Rogalinski ~~509~~ 253 447 7924
9503 196th Ave E
Bonney Lake, WA 98391*

2. Date of Priority: 05/15/1956

3. Source: GROUND WATER , GROUND WATER Trib. to: ,

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
48N	02W	27	SW NE	KOOTENAI	
~~48N~~	~~02W~~	~~27~~	~~NW SE~~	KOOTENAI	

5. Description of diverting works:

WELL, 8 FEET DEEP *in basement of home TH*

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
~~STOCKWATER~~	~~03/15~~	~~11/15~~	~~0.02~~	
DOMESTIC	01/01	12/31	0.01	

7. Total Quantity Appropriated is:

~~0.03 C.F.S.~~
0.01 CFS TH

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	02W	27	~~NW~~ ~~SE~~	~~SW~~ ~~NE~~ <i>M</i>	DOMESTIC	
			~~NW~~ ~~SE~~	~~SW~~ ~~NE~~	DOMESTIC	
					STOCKWATER	
					STOCKWATER	

11. Place of use in counties: KOOTENAI

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Beneficial Use

16. 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 _____ do not ☒ wish to receive 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 that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Thomas R. Hoiland Date: 3/31/15

_____ Date:

State of Idaho)
) SS.
 County of _____)

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____