

RECEIVED

APR 20 2015

DEPARTMENT OF
WATER RESOURCES

**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 49576
NUMBER:
Ident. Number: 95-17005
Date Received:
Receipt No.:**

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
NATHANAEL BUSH	4804 W PRESLEY RD	COEUR D ALENE	ID	USA	83814
BONITA NILES-BUSH	4804 W PRESLEY RD	COEUR D ALENE	ID	USA	83814

2. Date of Priority:

Date	Explanation
1/1/2000	Property was placed in a trust for Nathanael Bush by his parents. Nathanael started using the property at that time.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
49N	04W	3	4			KOOTENAI

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

Water Use	Number Of Homes	Stock	Description
DOMESTIC	3	-	Small cabin and a pole building also utilizes the water.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW

DOMESTIC | 0.040 | 0.00 | 0.0

Totals:

CFS	AF	KW
0.010	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	49N	04W	3			KOOTENAI	4	-

9. Basis of Claim:

Basis

Beneficial Use

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: Form + 1 attachment

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):

Bonita & Miler Bush

Date:

4/15/15

Date:

4-15-15

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 _____

Please print name

* Metal Tag # From Well -
D0010418

RECEIVED 4/15/15

APR 20 2015

DEPARTMENT OF
WATER RESOURCES

Carter,

Thank you For your
assistance on Filing
our water rights claim.

I choose not to pay
online to avoid paying
any additional fees.
Therefore, payment is
enclosed.

Claim#-95-17005

Claim ID- 11792

Well ID# - 00010418

Thank you!

Bonnie(Bonita) Niles-Bush
208-818-5254