



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815-7763
Phone: (208) 762-2800 • Fax: (208) 762-2819 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

April 21, 2015

JONATHAN UHL
11702 N SUNRISE CT
RATHDRUM ID 83858

SUBJECT: Coeur d'Alene-Spokane River Basin Adjudication (CSRBA) Claim No. 94-8968

RESPONSE DUE DATE: MAY 6, 2015

Dear Mr. Uhl:

We are in the process of recommending the above Notice of Claim to a Water Right for decree in the CSRBA. However, to ensure an accurate recommendation, we need more information from you.

I have enclosed the map of the property submitted by the original claimant, Mark Hart. Please verify on this map where the well is located and show where the water is used. Also enclosed is a copy of the claim, for your information.

Please return the map, to my attention, by the due date listed above. We will be submitting this information for inclusion in our Director's Report within the next several months. Feel free to contact me if you have any questions. I can be reached at (208) 762-2802 or by email at linda.werner@idwr.idaho.gov.

Sincerely,

Linda A. Werner
Water Resource Agent, Sr.

Enclosure: Map
Copy of Claim Number 94-8968

RECEIVED
MAY 06 2015
IDWR / NORTH

RECEIVED

MAY 08 2015

IDWR / NORTH

Also there is only the
1 House on the property
Now Not 8. The lot
size is .8 acres that we
will be irrigating. I see
it is not listed.

Jonathan will

RECEIVED

MAY 06 2015

IDWR / NORTH

HART PIN RP49N02E327560

COPY

Edward Thomas Wren
is located off CDA.
Trails by the 1st bridge

Trails of CDA



The house is approx here

The well is located
at the SE corner of
35 Vets Rd



SCANNED

DEC - 5 2011

COPY

RECEIVED
MAY 06 2015
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: 94-8968

Date Received: 12/2/2011

Receipt No: N028683

Received By:

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

1. Name of Claimant(s)

JONATHAN UHL Phone:(208) 262-1700
11702 N SUNRISE CT
RATHDRUM ID 83858

2. Date of Priority: 11/14/2011

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
49N	02E	32	SE SE		SHOSHONE	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1/1 12/31	0.12	0

7. Total Quantity Appropriated is: 0.12 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses:

Number of Homes: 8	<u>Water Use</u>	<u>Type Of Stock</u>	<u>Number Of Stock</u>
--------------------	------------------	----------------------	------------------------

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
49N	02E	32	NE SE		DOMESTIC	
			NW SE		DOMESTIC	
			SE SE		DOMESTIC	
			SW SE		DOMESTIC	
					Section Acres	
					Total Acres	

10. Place of use in counties: SHOSHONE

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

Y703

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use:	<u>Water Use</u>	<u>Description</u>
	DOMESTIC	8 HOUSES.

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): _____ Date: _____
_____ 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