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Form No.42-1409-1 (Internet 3/12)

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

ID Number: 95-8265Date Received: 12/22/15Receipt No: N020757, N031671Amount: \$4⁰⁰/20⁰⁰ By: SS

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

Please type or print clearly

1. Name of claimant(s) HILBY'S ADDITION TO SQUAW BAY C/O Barbara Nimke Phone 208-664-3996
 Mailing address 5846 S MARY AVE HARRISON ID 83833
Street or Box City State
2. Date of priority (only one (1) per claim) 2/15/1983
Month Day Year (yyyy)
3. Source of water supply (check one) Ground Water (x) or Other () (a) _____
 which is tributary to (b) _____
4. a. Location of point of diversion is: Township 49N, Range 03W, Section 4,
NE 1/4 of SE 1/4, or Govt. Lot _____, B.M., County of KOOTENAI
 Parcel (PIN) no. _____
 Additional points of diversion if any: _____
 If available, GPS coordinates: _____
- b. If instream flow, beginning point of claimed instream flow is: Township _____, Range _____,
 Section _____, _____ 1/4 of _____ 1/4, or Govt. Lot _____, B.M., County of _____
 ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4 or
 Govt. Lot _____, B.M., County of _____
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, etc.),
 including the dates of any changes or enlargements in use, the dimensions of the diversion works as
 constructed and as enlarged and the depth of each well.
51' DEEP WELL, 1800 GAL. STEEL HOLDING TANK, PUMPED TO DISTRIBUTION LINE VIA 3HP PUMP
AND (2) 120 GAL. PRESSURE TANKS

6. Water is claimed for the following purposes:

(both dates are inclusive mm-dd) (cfs) (acre-feet)

For IRRIGATION purposes from 03/15 to 11/15 amount 0.08 or 12.0

For DOMESTIC purposes from 01/01 to 12/31 amount 0.20 or 10.8

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.20 (cfs) and/or (b) 22.8 (acre-feet)

8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served; Stockwater: type and number of livestock, etc.): DOMESTIC USE IS FOR 18 HOMES

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (e.g. D for domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
49N	03W	4													4				4
49N	03W	4													D				-

Parcel (PIN) no(s). _____ Total number of acres irrigated 4

10. In which county(ies) are lands listed above as place of use located? KOOTENAI

11. Do you own the property listed above as place of use? Yes () No (x)

If your answer is no, describe in remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ()

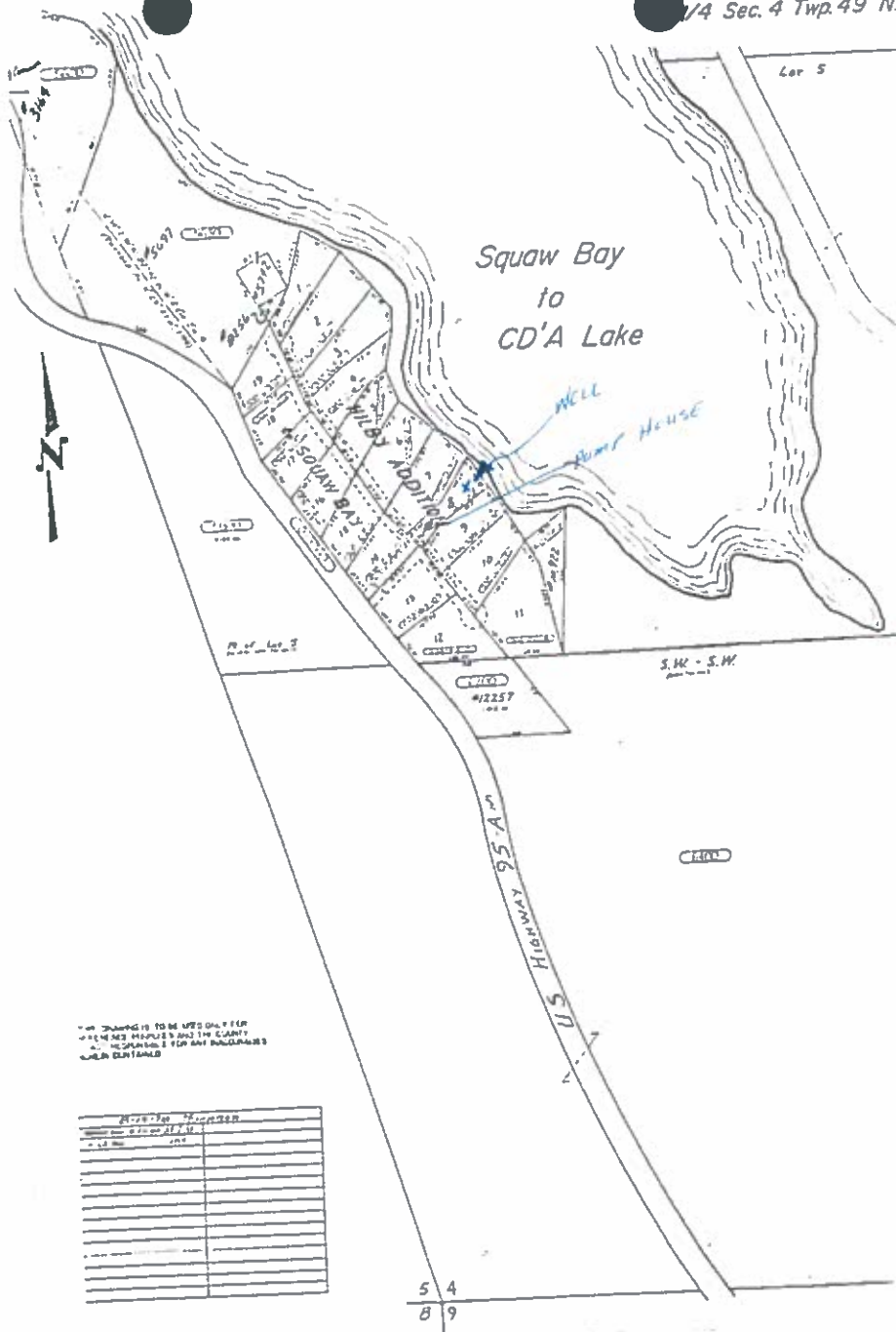
13. Remarks:

THIS RIGHT INCLUDES AN ACCOMPLISHED CHANGE IN POD AND POU LOCATION. THE QUARTER-
QUARTERS HAVE BEEN CORRECTED TO REFLECT THEIR ACTUAL LOCATIONS.

I, BARBARA NIMKE, AM A TRUSTEE OF HILBY'S ADDITION TO SQUAW BAY AND AM FILING ON THEIR
BEHALF.

Last name _____ Identification no. _____

1/4 Sec. 4 Twp. 49 N.1



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JAN 18 1991

14. Basis of claim (check one) Beneficial Use () Posted Notice () License (X) Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable, provide IDWR water right number 95-08265

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 notices in the Coeur d'Alene-Spokane River Basin Adjudication".

b. I/We do () do not (X) 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 under penalty of 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 of perjury that I am

Trustee of Hilby's Addition to Squaw Bay,
Title Organization

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

Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of authorized agent [Signature] Date 12-22-15

Title and organization Trustee, Hilby's Addition to Squaw Bay

16. Notice of appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Last name _____ Identification no. _____