

Form 25a

RECEIVED
AUG - 4 2015
IDWR/NORTHERN

REQUEST FOR WITHDRAWAL OF CLAIM

Name of Claimant:

(Please Print) LOWELL A NELSON

Mailing Address: 11313 E WYDEN LAKE RD, WYDEN, ID 83835

Amount: \$ 25.00 Receipt No.: T089166

County of Water Right:

KOOTENAI

Claim No(s): 95-355

I wish to withdraw the Notice(s) of Claim to a Water Right which number(s) appear above and for which I previously paid a filing fee to the Idaho Department of Water Resources. I do /do not request a refund of the filing fee. If a refund is requested I have attached an explanation of the justification for granting a refund.

Lowell A. Nelson
(Signature of Claimant) (Date)

08/03/2015

(Signature of Claimant) (Date)

(Signature of Claimant) (Date)

Return to:

Idaho Department of Water Resources
Adjudication Section

For IDWR Use

Initials Date

Approval Region And 8-9-2016

Approval State Office

Data Entry

Claim File