

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 95-16387
Date Received: 8/14/2015
Receipt No: NO31445
Received By: LW

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

1. Name of Claimant(s)

ESTATES OF CARL & VIOLET NAGEL Phone: (208) 772-5892

832 W OAKWOOD DR
HAYDEN ID USA 83835

HERBERT NAGEL Phone: (208) 772-5892

832 W OAKWOOD DR
HAYDEN ID USA 83835

2. Date of Priority: 05/29/1986

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
51N	05W	1	SE NW	KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	11/01	0.2	30
STOCKWATER	01/01	12/31	0.01	0.7
DOMESTIC	01/01	12/31	0.11	6

7. Total Quantity Appropriated is:
0.32 C.F.S. and/or 36.7 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 5

10. Place of use:

Township	Range	Section	1/4 of 1/4		Lot	Use	Acres
51N	05W	1	SW	NW		IRRIGATION	20
			NE	NW	3	STOCKWATER	
			NW	NW	4	STOCKWATER	
			SW	NW		STOCKWATER	
			SE	NW		STOCKWATER	
			NE	NW	3	DOMESTIC	
			NW	NW	4	DOMESTIC	
			SW	NW		DOMESTIC	
			SE	NW		DOMESTIC	
Section Acres						20	
52N	05W	36	NE	SW		DOMESTIC	
			SW	SW		DOMESTIC	
			NE	SW		STOCKWATER	
			SW	SW		STOCKWATER	
Total Acres						20	

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? ~~No~~ Yes

13. Other Water Rights Used:

14. Remarks:

Domestic use is for 5 homes.

This right is a split from former right 95-8508.

15. Basis of Claim: License

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 ~~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 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 that I am Henry J. Nagel Personal Representative of

Estate of Violet who was Personal Representative of Carl Nagel that I have signed the foregoing

document in the space below as Henry J. Nagel of

Estate of Violet Nagel and that the statements contained in the

foregoing document are true and correct. Henry J. Nagel
Signature of Authorized Agent

Personal Representative
Title and Organization

August 14, 2015
Date

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____