

RECEIVED

JUN 25 2010

IDWR/NORTHERN

**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 95-16254
Date Received: 6-25-10
Receipt No: N025049
Received By: cm

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s) CARL H. CRITZ Phone (925) 838-0271

Mailing Address 24 TEA TREE CT. DANVILLE. CA. Zip 94526
Street or Box City State

2. Date of Priority: (Only one per claim) 02/21/1994
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (✓) or Other () (a) _____
which is tributary to (b) _____

4. Location of Point of Diversion is: Township 50 N, Range 4 W, Section 20,
NW 1/4 of SE 1/4, or Govt. Lot _____ BM. County of KOOTENAI;

Parcel (PIN) no. 50N04W207800

Additional points of diversion if any: _____

If available, GPS coordinates: _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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.

WELL 6"

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For DOMESTIC purposes from _____ Month/Day _____ Month/Day _____ cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 cfs (✓) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) DOMESTIC SINGLE

SCANNED
JUN 25 2010

9. Location of Place of Use is: Township 50N, Range 4W, Section 20,
NW 1/4 of SE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 50N04W207800
for (Check One) Domestic (☒) Stock () Domestic and Stock ()
If different than shown in Item 4

Additional places of use, if any _____

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 ()

If the 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:

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

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 () wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1 WELL DRILLERS REPORT

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) Carl H. Cif Date: 6-4-2010

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 _____

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. _____

SCANNED
JUN 25 2010



SCANNED
JUN 25 2010

FEE SCHEDULE

Application fees (CFS = cubic feet per second – AF = acre-feet)

CFS	AF	Fee	CFS	AF	Fee
0.00 – 0.20	0 – 20	\$100.00	11.01 – 12.00	1101 – 1200	\$690.00
0.21 – 1.00	21 – 100	\$250.00	12.01 – 13.00	1201 – 1300	\$730.00
1.01 – 2.00	101 – 200	\$290.00	13.01 – 14.00	1301 – 1400	\$770.00
2.01 – 3.00	201 – 300	\$330.00	14.01 – 15.00	1401 – 1500	\$810.00
3.01 – 4.00	301 – 400	\$370.00	15.01 – 16.00	1501 – 1600	\$850.00
4.01 – 5.00	401 – 500	\$410.00	16.01 – 17.00	1601 – 1700	\$890.00
5.01 – 6.00	501 – 600	\$450.00	17.01 – 18.00	1701 – 1800	\$930.00
6.01 – 7.00	601 – 700	\$490.00	18.01 – 19.00	1801 – 1900	\$970.00
7.01 – 8.00	701 – 800	\$530.00	19.01 – 20.00	1901 – 2000	\$1,010.00
8.01 – 9.00	801 – 900	\$570.00	20.01 – 100.00	2001 – 10000	*
9.01 – 10.00	901 – 1000	\$610.00	101.01 – 500.00	10001 – 50000	**
10.01 – 11.00	1001 – 1100	\$650.00	500.01 & over	50001 & over	***

* \$1,010.00 plus \$20.00 for each additional 1.0 cfs or part thereof or 100 acre-feet or part thereof over the first 20 cfs or 2,000 acre-feet.

** \$2,610.00 plus \$10.00 for each additional 1.0 cfs or part thereof or 100 acre-feet or part thereof over the first 100 cfs or 10,000 acre-feet.

*** \$6,610.00 plus \$2.00 for each additional 1.0 cfs or part thereof or 100 acre-feet or part thereof over the first 500.0 cfs or 50,000 acre-feet.

Your application and fee may be submitted to one of the following offices:

Northern Region

Idaho Dept. of Water Resources
7600 N Mineral Dr., Suite 100
Coeur d'Alene, ID 83815

Tel. – 762-2800
FAX – 762-2819

Eastern Region

Idaho Dept. of Water Resources
900 N. Skyline Dr., Suite A
Idaho Falls, ID 83402

Tel. – 525-7161
FAX – 525-7177

Southern Region

Idaho Dept. of Water Resources
1341 Fillmore St., Suite 200
Twin Falls, ID 83301

Tel. – 736-3033
FAX – 736-3037

Western Region

Idaho Dept. of Water Resources
2735 Airport Way
Boise, ID 83705

Tel. – 334-2190
FAX – 334-2348