

RECEIVED

MAR 01 2017

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: 95-9957

Date Received: 3/1/17

Receipt No: NO 32411 / NO 32412

Amount: 100.00 By: NS

\$5000

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of claimant(s) J HANK HESTER C/O NATHAN HESTER Phone (208) 946-6915
Mailing address 1826 VAY RD PRIEST RIVER ID 83856
Street or Box City State
2. Date of priority (only one (1) per claim) 5/5/1995
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 53N, Range 03W, Section 15,
NE 1/4 of SW 1/4, or Govt. Lot _____, B.M., County of KOOTENAI
Parcel (PIN) no. 002000020110
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.
WELL WITH PIPELINE TO HOMES

SCANNED

MAR 01 2017

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 0.05 or 13.5

For DOMESTIC purposes from 01/01 to 12/31 amount 0.05 or 5.4

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.05 (cfs) and/or (b) 18.9 (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 FOR 9 HOMES

9. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
53N	03W	15									3			1.5					4.5
53N	03W	15									D			D					

Parcel (PIN) no(s). _____ Total number of acres irrigated 4.5

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 (x)

13. Remarks:

SHARED WELL AGREEMENT BETWEEN HOMEOWNERS

Last name HESTER Identification no. _____

SCANNED
MAR 01 2017

PARCEL LOCATION FOR CSRBA WATER RIGHT CLAIM 95-9957



SCANNED

MAR 01 2017

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 95-9957

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: 1

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) Arthur Hester Date: 3-1-17

Power of Attorney Date: _____

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 HESTER Identification no. _____

SCANNED
MAR 01 2017

GENERAL POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That

JEFFREY HANK HESTER
residing at 1826 VAY RN City of PRIEST RIVER
County of BONNER State of IDAHO have made,
constituted and appointed, and by these presents do make constitute and
appoint NATHAN DARYLL HESTER
of the City of COA County of KOOTENAI
State of IDAHO my/our true and lawful attorney in fact for me/us

and in my/our name, place and stead, and for my/our use and benefit to ask, demand, sue for, recover, collect and receive all such sums of money, debts, dues, accounts, legacies, bequests, interests, dividends, annuities and demands whatsoever, as now or shall hereafter become due, owing, payable or belonging to me/us and have, use and take all lawful ways and means in my/our name or otherwise for the recovery thereof, by attachments, arrests, distress or otherwise, and to compromise and agree for the same, and acquittances or other sufficient discharge for the same for me/us and in my/our name, to make, seal and deliver, to bargain, contract, agree for, purchase, receive and take lands, tenements, hereditaments, and to accept the seizing and possession of all lands, and all deeds and other assurances in the law therefor, and to lease, let, demise, bargain, sell, release, convey, mortgage and hypothecate lands, tenements and hereditaments, upon such terms and conditions, and under such covenants as he/she/they shall think fit. Also to bargain and agree for, buy, sell, mortgage, hypothecate, and in any and every way and manner deal in and with goods, wares and merchandise, choses in action, and other property in possession or in action, and to make, do and transact all and every kind of business, of what nature and kind soever, and also for me/us and in my/our name, and as my/our act and deed, to sign, seal, execute, deliver and acknowledge such deeds, leases and assignment of leases, covenants, indenture, agreements, mortgages, hypothecations, bottomries, charter parties, bills of lading, bills, bonds, notes, receipts, evidences of debt, releases and satisfaction of mortgage, judgments and other debts, and such other instruments in writing of whatever kind or nature, as may be necessary or proper in the premises.

GIVING AND GRANTING unto my/our said attorney in fact full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to the execution of the powers herein granted, as fully to all intents and purposes as I/we might and could do if personally present. I/we hereby ratifying and confirming all that my/our said attorney in fact shall lawfully do or cause to be done by virtue of these presents.

THIS INSTRUMENT may not be changed orally.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I/we hereby agree that any third party receiving a duly executed copy or facsimile of this instrument may act hereunder, and that revocation or termination hereof shall be ineffective as to such third party, unless and until actual notice or knowledge of such revocation or termination shall have been received by such third party. For myself/ourselves and for my/our heirs, executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any such third party by reason of such party having relied on the provisions of this instrument.

THIS POWER OF ATTORNEY shall be revoked upon, shall not be affected by subsequent disability or incompetence of the principal.

IN WITNESS WHEREOF, have hereunto set hand the day of 3-7, 2012.

STATE OF IDAHO)
County of Kootenai) ss.

Before me, the undersigned Notary Public, personally appeared the person(s) above, to me known or proved, who did sign the above on the date set forth above.

GAYLE M YOUNG
Notary Public
State of Idaho

Gayle M Young
Notary Public for the State of Idaho
Residing at Kootenai
My Commission Expires 9-2-16

CLIFFORD T. HAYES 1P 2376250006
KOOTENAI COUNTY RECORDER Page 1 of 1
DAS Date 03/21/2012 Time 03:00:27
REQ OF NATHAN HESTER
RECORDING FEE: \$10.00



2376250006 XT

SCANNED
MAR 01 2017