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Form No. 42-1409-2 (Internet 3/12)

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 - 13152
Date Received: 12/19/2013
Receipt No: N025127
Amount: _____ By: _____

Amended Claim

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

Please type or print clearly

1. Name of claimant(s) TRAVIS EWERT Phone (541) 554-7993 ~~(548)~~ 554.7993
   Mailing address 86492 TERRITORIAL RD (Street or Box) VENETA (City) OR (State) ZIP 97487
2. Date of priority (only one (1) per claim) 07-09-1953 (Month/Day/Year (yyyy))
3. Source of water supply (check one) Ground Water ( ) or Other (×) (a) COEUR D'ALENE LAKE
   which is tributary to (b) SPOKANE RIVER
4. Location of point of diversion is: Township 47N, Range 04W, Section 12,
   SE 1/4 of SW 1/4, or Govt. Lot 4, B.M., County of KOOTENAI
   Parcel (PIN) no. 0-8800-001-007-0
   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.
   PUMP AND PIPE LINE
6. Water is claimed for the following: (Limited to domestic and/or stockwater uses. See page 1 of the instructions.)

		Month/Day		Month/Day	cfs (×) AFY ( )
For DOMESTIC	purposes from	03-15	to	11-15	amount .04
For _____	purposes from	_____	to	_____	amount _____

7. Total quantity claimed .04 cfs (×) or AFY ( )
8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): ONE CABIN

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9. Location of place of use is: Township 47N, Range 4W, Section 12, SE 1/4 of SW 1/4, or Govt. Lot 4, B.M., Parcel (PIN) no. (if different than shown in Item 4) _____

For (check one) **Domestic (×)** **Stock ( )** **Domestic and Stock ( )**

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 ( ) Sold Cabin on 11/8/13
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:
I have recently sold the property (Lake Cabin) to Greg & LANA EWERT. Their phone # is (509)529-2240

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: _____

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: 12-13-13

_____ 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 forgoing 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 _____

_____

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