

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 95-15374Date Received: 6-10-11Receipt No: N027638Received By: wn

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

RECEIVED

JUN 10 2011

IDWR/NORTHERN

Please type or print clearly

1. Name of Claimant (s) TIM AND PAT GREENE Phone (208) 883-5324Mailing Address 1026 Wallen Road Moscow ID ZIP 83843
Street or Box City State2. Date of Priority (Only one (1) per claim) 04/01/1957
Month Day Year (YYYY)3. Source of water supply (Check one) Ground Water () or Other (☒) (a) HIDDEN LAKE
which is tributary to (b) ST. JOE RIVER4. a. Location of Point of Diversion is: Township 47 North, Range 3 West, Section 31,
1/4 of _____, 1/4 Govt. Lot _____, BM., County of Bene wa kParcel (PIN) no. Hidden lake Unit # 14Additional points of diversion if any: NoneIf available, GPS Coordinates (close) 47°23' 05.60" N x 116° 45' 46.75" W

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., 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. _____

Pump extends from home with 1 1/2" pipe extending 2 1/2' in
water of Hidden lake, St. Joe River. Domestic use only -
summer only - vacation float home - one family.

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JUN 10 2011

6. Water is claimed for the following purposes:

(both dates are inclusive MM-DD)

(cfs)

(acre feet)

For Domestic Use - Float Home purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.02 (cfs) and/or (b) _____ (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.) Domestic one household

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: 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	

Parcel (PIN) no(s). _____

Total number of acres irrigated _____

10. In which county (ies) are lands listed above as place of use located? Benewah

11. Do you own the property listed above as place of use? Yes (☒) No (☐)

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:

vacation float home - summer only - one family
in Haysburn State Park

Township 47 North Range: 3 West Section 31

Last Name _____

Identification No. _____

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JUN 10 2011

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) Matthew Greene Date: 6/9/11
Patricia A. Greene Date: 6/9/11

~~For Organizations: I do solemnly swear or affirm under penalty of perjury that I am~~

~~_____ of _____, n/a~~
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. _____

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