

RECEIVED

MAR 29 2018

02/09/2018

IDWR / NORTH

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: March 30, 2018

Water right number: ~~95-14639~~

95-14641

~~NIELSON, JAMES R ETAL, TRUSTEES
PO BOX 700
CODR, WY 82414
Telephone Number: 7195104598~~

NIELSON VENTURES, LLC
1790 CEDAR VALLEY LANE
COLORADO SPRINGS, CO 80919

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 3-26-19

SIGNATURE: [Signature]

Please print your name:

JEFF NIELSON, MANAGER

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D'ALENE, ID 83815-7763, (208) 762-2800

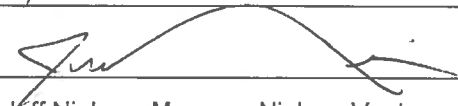
CHANGE IN ADDRESS OF NOTICE OF CLAIM

Adjudication Claim Number(s): 95-14641

Previous Mailing Address: 2540 Himalaya Court
Colorado Springs, CO 80919

New Mailing Address: 1790 Cedar Valley Lane
Colorado Springs, CO 80919

Telephone Number: (719) 510-4598

Signature(s) of all Claimant(s): 
Jeff Nielson, Manager Nielson Ventures, LLC
Print your name below your signature.

Please mail or FAX this completed form to the office nearest you:

Adjudication Section
Idaho Department of Water Resources
7600 N. Mineral Dr., Ste. 100
Coeur d'Alene, ID 83815-7763
Phone 208-762-2800
FAX 208-762-2819

Adjudication Section
Idaho Department of Water Resources
2735 Airport Way
Boise, ID 83705-5082
Phone 208-334-2190
FAX 208-334-2348

Adjudication Section
Idaho Department of Water Resources
650 Addison Ave. W, Ste. 500
Twin Falls, ID 83301-5858
Phone 208-736-3033
FAX 208-736-3037

Adjudication Section
Idaho Department of Water Resources
900 N. Skyline Dr., Ste. A
Idaho Falls, ID 83402-3653
Phone 208-525-7161
FAX 208-525-7177

Adjudication Section
Idaho Department of Water Resources
322 E. Front St.
P.O. Box 83720
Boise, ID 83720-0098
Phone 208-287-4800
FAX 208-287-6700

IDWR Use Only

Revised 02/14

Data Entry: _____

Date: _____

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 95-14641

Date Received: 11-12-09

Receipt No: 1022797

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

RECEIVED

NOV 12 2009

IDWR/North

1. Name of Claimant(s) Nielson Ventures, LLC Phone (719) 510-4598

Mailing Address 2540 Himalaya Court Colorado Spring CO Zip 80919
Street or Box City State

2. Date of Priority: (Only one per claim) 05/31/1967
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 51N, Range 03W, Section 03,
S.E. 1/4 of N.E. 1/4, or Govt. Lot _____ BM. County of Kootenai County, Idaho;
Parcel (PIN) no. 51N03W032150

Additional points of diversion if any: N/A

If available, GPS coordinates: N/A

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 (Depth = 158 feet); pump; pump house.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)
For Domestic purposes from 01/01 to 12/31 amount 0.04 cfs(✓) or AFY()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.04 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 - One (1) Household

9. Location of Place of Use is: Township 51N, Range 03W, Section 03,
S.E. 1/4 of N.E. 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 51N03W032150
If different than shown in Item 4

for (Check One) Domestic (✓) Stock () Domestic and Stock ()

Additional places of use, if any N/A

10. In which county (ies) are lands listed above as place of use located? Kootenai County, Idaho

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 N/A

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: 0

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: _____

_____ Date: _____

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

Manager _____ of Nielson Ventures, LLC,
Title _____ Organization _____

that I have signed the foregoing document in the space below as

Manager _____ of Nielson Ventures, LLC,
Title _____ Organization _____

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent [Signature] Date 11-10-09

Title and Organization Nielson Ventures, LLC

16. Notice of Appearance:

Notice is hereby given that I, Paul R. Harrington / Lukins & Annis, P.S., 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 [Signature] Date 11-11-2009

Address 250 Northwest Blvd., Suite 102, Coeur d'Alene, Idaho 83814

Last Name Nielson Ventures, LLC Identification No. _____