

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

Claim ID: 95-15895

Date Received: 12/7/2018

Receipt No: N024905

Claim Fee: \$2500 By: _____

RECEIVED

DEC 07 2018

IDWR/NORTHERN

AMENDED
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) JAKE SCOTT AND/OR JILLEEN SCOTT Phone (208) 301-4517
Mailing address 19576 S LOFFS BAY RD COEUR D'ALENE ID Zip 83814
Street or Box City State
Email address (optional) _____
2. Date of priority: (Only one per claim) 11/14/1973 (Explain priority date selected in Remarks)
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 49N, Range 04W, Section 34,
NW 1/4 of SW 1/4, or Govt. Lot _____ BM, County of KOOTENAI;
Parcel no. 49N04W345800
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 WITH PIPELINE TO HOME
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 (✓) or AFY ()
For <u>DOMESTIC</u> purposes from <u>1/1</u> to <u>12/31</u> amount <u>0.04</u>			
For <u>STOCKWATER</u> purposes from <u>1/1</u> to <u>12/31</u> amount <u>0.02</u>			
7. Total quantity claimed 0.06 cfs (✓) or AFY ()
8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
DOMESTIC USE FOR 1 HOME, STOCKWATER FOR UP TO 10 HEAD MIXED

OK
km

OK. Mon

9. Location of place of use is: Township 49N, Range 04W, Section 34,
NW 1/4 of SW 1/4, Govt. Lot _____ BM, Parcel no. -5800, -4600, -6600

If different than shown in Item 4

for (check one) **Domestic** () **Stock** () **Domestic and Stock** (✓)

Additional places of use, if any STOCKWATER ALSO SERVES PARCELS -4600 & -6600

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 (include an explanation of the priority date selected):

DATE WELL WAS COMPLETED AND PUT TO USE

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 95-15895

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 Water System 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

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) [Signature] Date: 12-6-18

Date: 12-6-18

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

_____ of _____
Agent's title (Please print) Name of organization (Please print)

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

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. **Notice of Appearance:**

Notice is hereby given that I, (please print) Kinzo H. Mihara Mihara Law PLLC will be acting as attorney at law of behalf on 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 K. H. Mihara Date 11/21/18

Address 925 N. Third St., COA, ID 83814

Name of claimant(s) JAKE SCOTT AND/OR JILLEEN SCOTT Claim ID _____

The image is an aerial photograph of a rural landscape, likely a farm or ranch. A blue boundary line is drawn across the image, enclosing a central area. This central area contains a small, light-colored building, possibly a house or a shed, and a road or driveway. The surrounding areas are labeled with survey codes: SSW, SE, SE 3, SE 7, SWSW, NW 3/4, 49N04W, NESW, and SE 3/4. A north arrow is located in the top left corner of the image.

The USDA-FSA Aerial Photography Field office asks to be credited in derived products.