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Form No.42-1409-1 (Internet 5/17)

DEPARTMENT OF
WATER RESOURCES

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: 95-17786

Date Received: _____

Receipt No: _____

Claim Fee: _____ By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of claimant(s) GLACIER NEC HUETTER PRAIRIE LLC Phone (208) 667-4086
Mailing address 2100 NORTHWEST BLVD #350 COEUR D'ALENE ID Zip 83814
Street or Box City State
Email address (optional) cmeyer@parkwoodproperties.com
2. Date of priority: (Only one per claim) OCTOBER 23, 1964 (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. a. Location of point of diversion is: Township 51N, Range 04W, Section 21,
SE 1/4 of NW 1/4, Govt. Lot _____, BM, County of KOOTENAI
Parcel no. H00000214350
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,
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.
WELL WITH PIPELINE TO CENTER PIVOT IRRIGATION SYSTEM

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD) (cfs) (acre-feet)

For IRRIGATION purposes from 3/15 to 11/15 amount 0.23 or 56.0

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.23 (cfs) and/or (b) 56.0 (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) _____

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 (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
51N	04W	21											16						16

Parcel no(s) H00000216400

Total number of acres irrigated 16

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 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 (☒)

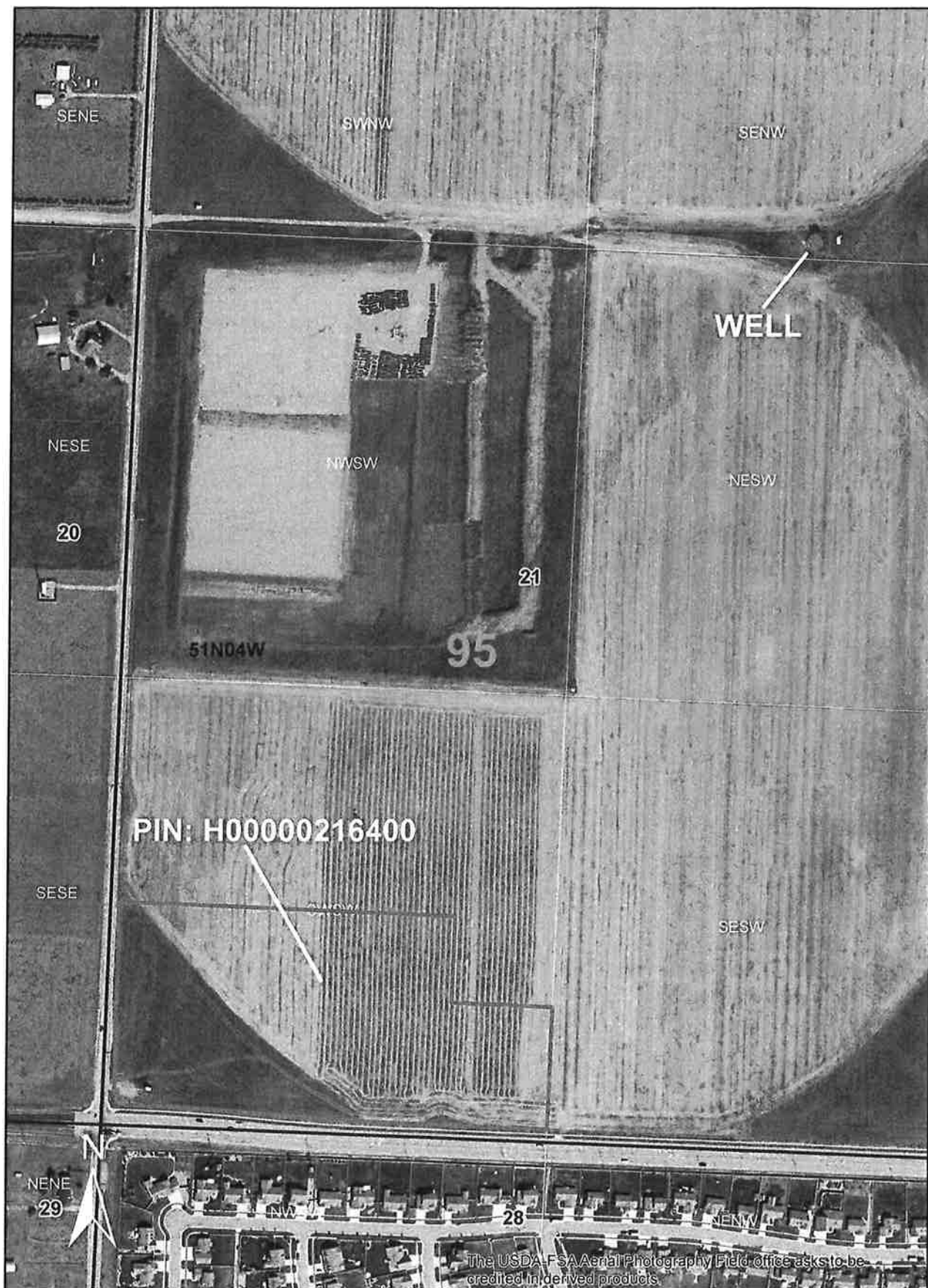
13. Remarks (Include an explanation of the priority date selected):

CLAIM IS FOR APPURTENANT PORTION OF WATER RIGHT LICENSE 95-9185

Name of claimant(s) GLACIER NEC HUETTER PRAIRIE LLC

Claim ID _____

PARCEL LOCATION FOR CSRBA CLAIM



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 95-9185

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: _____

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

ASSET MANAGER of GLACIER NEC HUETTER PRAIRIE
Agent's title (Please print) Name of organization (Please print)

LLC

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

Signature of Authorized Agent Christopher F. Meyer Date 3-25-19

Printed Name of Authorized Agent CHRISTOPHER F. MEYER

16. Notice of Appearance:

Notice is hereby given that I, (please print) _____, will be acting as attorney at law on 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 _____

Name of claimant(s) GLACIER NEC HUETTER PRAIRIE LLC Claim ID _____