

Form No. 42-1409 (2) b 7/07

**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 SNAKE RIVER BASIN WATER SYSTEM**

CIVIL CASE NUMBER: 39576

Ident. Number 84-72243

Date Received: _____

Receipt No: _____

Received By: _____

**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**

1. Name of Claimant(s) Tod Matthew Sween Phone (208) 476-3453

Mailing Address 3220 Upper Fords Creek Rd, Orofino, ID Zip 83544
Street or Box City State

2. Date of Priority: (Only one per claim) August 24, 1988
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 36 N, Range 2 E, Section 23,
NE, 1/4 of NW, 1/4 or Govt. Lot _____, BM., County of Clearwater; Parcel (PIN) No. RP36N02E23N02A

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, 150 ft depth, drilled August 24, 1988

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic purposes from 1-1 to 12-31 amount 0.04 cfs
Month/Day Month/Day (cfs) or (AFA)

For Stockwater purposes from 1-1 to 12-31 amount 0.02 cfs

7. Total Quantity claimed 0.06 cfs (cfs) or (AFA)

8. Non-irrigation uses. Describe fully. (eg. Domestic: Give number of households served if single ownership; Stockwater: Type and number of livestock)

Domestic - 1 household
Stockwater - 18 goats, 20 sheep, 46 poultry, 2 hogs
4 head range cattle, 4 horses, 1 donkey

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9. Location of Place of Use is: Township 36N, Range 2E, Section 23
NE, 1/4 of NW, 1/4, Govt. Lot _____, BM.; Parcel (PIN) No. _____

for (Circle One) Domestic Stock Domestic and Stock
 Additional places of use, if any _____

10. Which county (ies) are lands listed above as place of use located? Clearwater

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.

None () Water right No A84-07174

13. Remarks:

14. Basis of Claim (Circle 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 notice in the Snake 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) [Signature] Date: 10/26/07
 _____ 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 foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please Print Name

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed to the claimant signing above should be mailed to me at the address listed below.

Signature [Signature]

Address _____

Date _____

Last Name _____ Identification No. _____



Theresa K. Adams
Notary - State of Idaho
Exp 03/24/09