

RECEIVED
DEC 21 2011
IDWR / NORTH

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: 94-7270

Date Received: 12/2/2011

Received By: *do*

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

*Receipt # N028945
12/21/11*

1. Name of Claimant(s)

BOWMAN TIM
PO BOX 624
OSBURN ID 83849
BOWMAN LISA
PO BOX 624
OSBURN ID 83849

2. Date of Priority: 6/30/1983

3. Source: SPRINGS

Tributary to: TERROR GULCH CREEK

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
48N	03E	12	SW SE		SHOSHONE	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1/01 12/31	0.04	1.2

7. Total Quantity Appropriated is: 0.04 C.F.S. and/or A.F.A

8. Non-irrigation uses:

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
48N	03E	12	SW SE		DOMESTIC	
						Section Acres
						Total Acres

10. Place of use in counties: SHOSHONE

11. Do you own the property listed above as place of use? Yes

12. Other Water Rights Used:

13. Remarks:

Priority date description:

94-7270

12/2/2011

Description of use: Water Use

Description

DOMESTIC

3 points of diversion located in SWSE, S12, T48N, R3N.
Domestic use is for 1 home.

14. Basis of Claim: License

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 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.

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):

Tina Bowman
Tina Bowman

Date: 12-17-11

Date: 12-17-11

For Organizations: I do solemnly swear or affirm under penalty or 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

RECEIVED
DEC 21 2011
IDWR / NORTH