

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 92-7210
Date Received: 05/14/2012
Receipt No: C095319
Received By:

AMENDED
NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

CLARKIA WATER & SEWER DISTRICT Phone: (208)245-5097
PO BOX 1096
CLARKIA ID USA 83812-0096

2. Date of Priority: 04/26/1994

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
42N	02E	7	NW NE	SHOSHONE	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
MUNICIPAL	01/01	12/31	0.11	40.5

7. Total Quantity Appropriated is:
0.11 C.F.S. and/or 40.5 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
42N	02E	6	NE SE	MUNICIPAL	
			NW SE	MUNICIPAL	
			SW SE	MUNICIPAL	
			SE SE	MUNICIPAL	
42N	02E	7	NE NE	MUNICIPAL	
			NW NE	MUNICIPAL	

11. Place of use in counties: SHOSHONE

12. Do you own the property listed above as place of use? No

13. Other Water Rights Used:

14. Remarks:

Right includes accomplished change in point of diversion pursuant to Section 42-1425, Idaho Code.

Right includes accomplished change in purpose of use pursuant to Section 42-1425, Idaho Code.

Right includes accomplished change in place of use pursuant to Section 42-1425, Idaho Code.

Place of use is within the service area of Clarkia Water and Sewer District as provided for under Idaho law.

15. Basis of Claim: License

16. 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

Number of attachments: _____

For Organizations:

I do solemnly swear or affirm 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

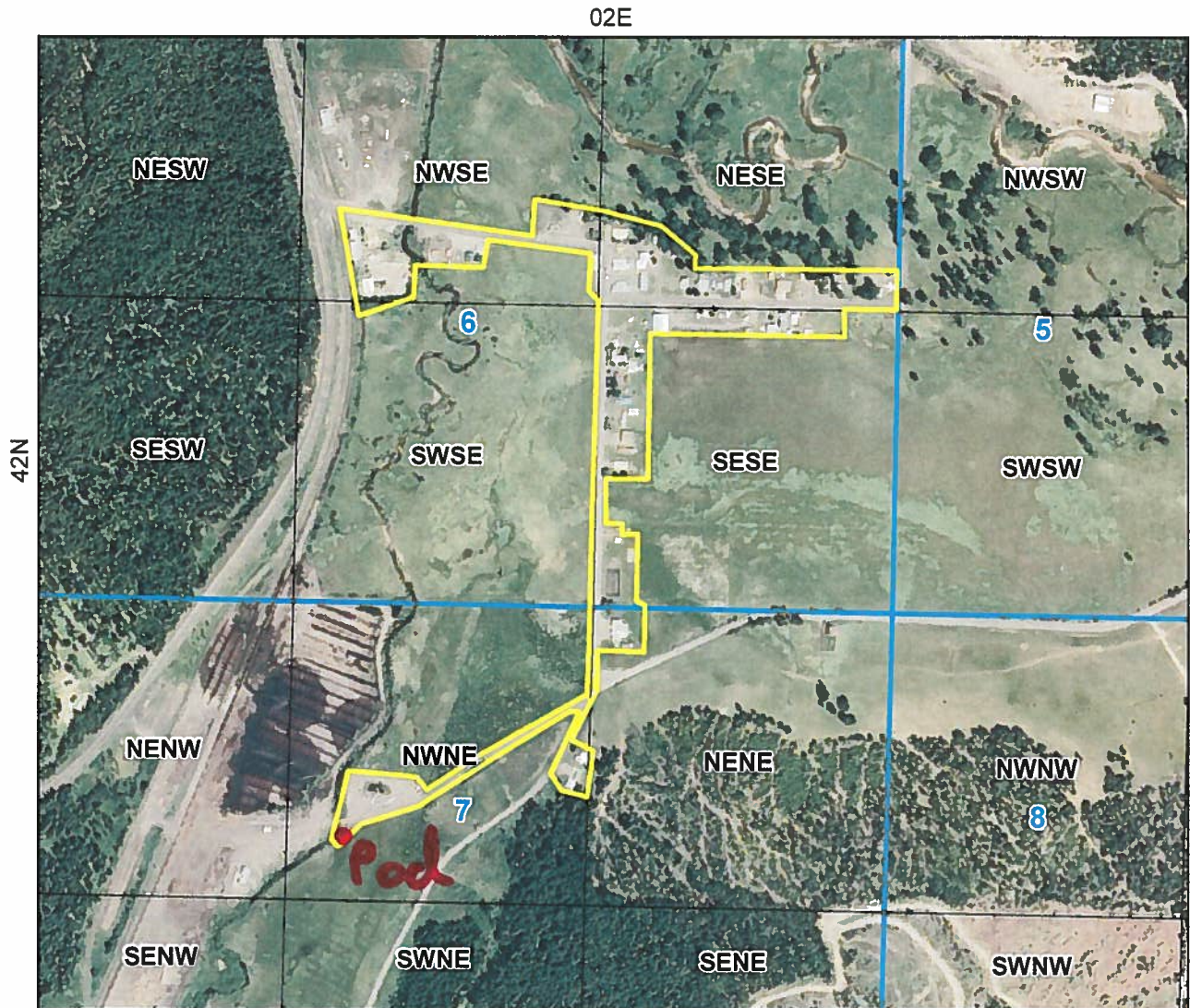
Title and Organization

Date

Clarkia Water & Sewer District

Adjudication Claim

92-7210



- Water Service Area Boundary
- Townships
- PLS Sections
- Quarter Quarters

0 0.1 0.2 0.4 Miles

