

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

ID Number: 95-16642Date Received: 7-16-13Receipt No: NO30007Amount: \$25.00 By: Chad

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

RECEIVED

JUL 16 2013

Please type or print clearly

IDWR/NORTHERN

1. Name of claimant(s) JOHN AND LISA PORRIA Phone 408-859-1592
Mailing address 5278 E UPPER HAYDEN LAKE RD HAYDEN LAKE ID ZIP 83835

Street or Box
City
State
2. Date of priority (only one (1) per claim) 08/31/2013

Month/Day/Year (yyyy)
3. Source of water supply (check one) Ground Water (x) or Other () (a)
which is tributary to (b)
4. Location of point of diversion is: Township 52N, Range 05W, Section 24,
SE 1/4 of SE 1/4, or Govt. Lot , B.M., County of KOOTENAI
Parcel (PIN) no. 52N05W-24-9070
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 PIPING TO NEW HOME CONSTRUCTION STARTED AND PUMP PUT IN ON 8/2013
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 (x) AFY ()

For DOMESTIC purposes from 1/1 to 12/31 amount 0.04
For purposes from to amount
7. Total quantity claimed 0.04 cfs (x) or AFY ()
8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): DOMESTIC FOR ONE HOME

9. Location of place of use is: Township 52N, Range 05W, Section 24, SE 1/4 of SE 1/4, or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) SAME

For (check one) **Domestic** (☒) **Stock** (☐) **Domestic and Stock** (☐)

Additional places of use, if any: _____

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:

WELL TAG D0017936 PUMP INSTALLED AUG 2013

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 _____

15. Signature(s)

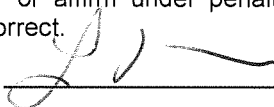
a. By signing below, I/we acknowledge that I/we have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication".

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: 7/16/13

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 _____

16. Notice of appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of 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 _____
