

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

RECEIVED
NOV 10 2014
DEPARTMENT OF
WATER RESOURCES

CIVIL CASE NUMBER: 49576

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER BASIN
WATER SYSTEM

Ident. Number 95-4083
Date Received: 3/2/2011
Receipt No: N026663
Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

AMENDED

1. Name of Claimant(s)

WILLIAM & LELA MORRIS FAMILY TRUST
1231 BILL MORRIS RD
PLUMMER ID 83851
Phone: (208) 686-1669

~~MORRIS FAMILY TRUST
PO BOX 1231 BILL MORRIS RD
PLUMMER ID 83851
Phone: (208) 686-1669~~

2. Date of Priority: 10/22/1918

3. Source: UNNAMED STREAM Trib. to: CHATCOLET LAKE

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
46N	03W	18	NE NE		BENEWAH	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	6 /1	11/1	0.1	
STOCKWATER	1 /1	12/31	0.1	

7. Total Quantity Appropriated is:
0.1 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	03W	18	NE NE		IRRIGATION	12
			NE NE		STOCKWATER	

SCANNED
NOV 12 2014

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Section Acres 12

Total Acres 12

11. Place of use in counties: BENEWAH

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Statutory Claim

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 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.

Lela E. (Morris) McCollum
Signature of Authorized Agent *owner/trustee*

William^{III} Lela Morris Family Trust
Title and Organization

Nov. 4, 2014
Date