

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

CIVIL CASE NUMBER: 49576

OF RIGHTS TO THE USE OF WATER FROM

THE COEUR D'ALENE - SPOKANE RIVER BASIN WATER SYSTEM

Ident. Number 91-7246

Date Received:

Receipt No: C092198

Received By:

Amended Claim

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

GAIL P ANDERSON Phone: (509) 758-8880

1543 HEIMARK CT

CLARKSTON WA USA 99403

BETH A ANDERSON Phone: (509) 758-8880

1543 HEIMARK CT

CLARKSTON WA USA 99403

RECEIVED
JAN 12 2015
IDWR/NORTHERN

2. Date of Priority: 05/01/1999

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
46N	01E	20	NE SW	BENEWAH	

5. Description of diverting works: DRILLED WELL D0010921 WITH 4 RV HOOKUPS.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1 /1	12/31	0.04	

7. Total Quantity Appropriated is:

0.04 C.F.S.

8. Total consumptive use:

SCANNED
JAN 12 2015

9. Non-irrigation uses:

Number of homes: 4

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
46N	01E	20	SE	NW	DOMESTIC	
			NE	SW	DOMESTIC	
			NE	SW	6 DOMESTIC	

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: Beneficial Use

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: 0

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):

Gail P. Anderson

Date: 1/10/15

Deek Anderson

Date: 1/10/15

SCANNED

JAN 12 2015

State of Idaho)
) SS.
County of _____)

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____

SCANNED
JAN 12 2015