

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

RECEIVED

MAR 11 2015

IDWR/NORTHERN

Ident. Number 94-8539

Date Received: 10/28/2011

Receipt No: T094200

Received By:

Amended Claim
NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

DALE K PARSON Phone:

3720 253 AVE NW

ISANTI MN USA 55040

PAMELA J PARSON Phone:

3720 253 AVE NW

ISANTI MN USA 55040

2. Date of Priority: 06/01/1973

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
50N	04E	29	SE NW	SHOSHONE	

5. Description of diverting works:

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

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Amended Claim

9. Non-irrigation uses:

Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
50N	04E	29	SE	NW	DOMESTIC	

11. Place of use in counties: SHOSHONE

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

13. Other Water Rights Used:

14. Remarks: POINT OF DIVERSION & PLACE OF USE LOCATED ON CDA RIVER CABIN SITES

LOT 15 (SHOSHONE COUNTY TAX PARCEL RPO10500000150).

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: _____

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): Dale & Parson Date: 3/6/15

Damele J Parson Date: 3/6/15

SCANNED

MAR 11 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

MAR 11 2015