

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 95-13628Date Received: 10/01/2010Receipt No: N025088Received By: Am

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

1. Name of Claimant(s) BILL L JOHNSON Phone (208) 683-2256Mailing Address 515 GRAND FIA DR Arhol Id Zip 83801
Street or Box City State2. Date of Priority: (Only one per claim) 4-12-1999
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (☒ or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township 54N, Range 3W, Section 23,
NE 1/4 of NW 1/4, or Govt. Lot _____ BM. County of BANNER;Parcel (PIN) no. RP 54N03W 230450AAdditional points of diversion if any: N/AIf available, GPS coordinates: N/A

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.

00005680 4-12-99 WELL COMPLETE
AND CONNECTED TO ONE HOME

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For DOMESTIC purposes from JAN 1 to DEC 31 amount .04
Month/Day Month/Day cfs (✓ or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 cfs (☒ or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) ONE HOMESCANNED
OCT - 1 2010

9. Location of Place of Use is: Township AP54N, Range 3W, Section 23
NE 1/4 of NW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____
If different than shown in Item 4

for (Check One) Domestic (☒) Stock (☐) Domestic and Stock (☐)

Additional places of use, if any N/A

10. In which county (ies) are lands listed above as place of use located? BONNER

11. Do you own the property listed above as place of use? Yes (☒) No (☐)

If the 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.

None or None (☒)

13. Remarks:

HOME OWNERS. SEE ATTACHMENT.
PROVID I BY BONNER COUNTY, SHOWS HOME
ON PROPERTY N: 1986

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: 2

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) Bill Johnson Date: 10/1/2010

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 _____

Last Name _____ Identification No. _____

SCANNED

OCT - 1 2010

FOR OFFICE USE ONLY

last name first name middle initial

☐

Copy given to property owner.

☒

Copy mailed to property owner.

022002
RECEIVED

FEB 08 2002

ASSESSOR'S OFFICE

HOMEOWNER'S EXEMPTION APPLICATION BONNER COUNTY, IDAHO

(IC 63-602G)

OWNER: BILL JOHNSON

MAILING ADDRESS: 515 GRAND FIR DR.
ATHOL ID 83801

PROPERTY ADDRESS OR LOCATION: SAME

PARCEL NUMBER: RP 54N03W232402A

DATE OCCUPIED: _____

DATE PURCHASED: 12-86? FROM: LARRY GOONAN

THE RESIDENTIAL IMPROVEMENT IS:

☒

SINGLE FAMILY

☐

MANUFACTURED HOME, (YEAR _____, MAKE _____, SIZE _____)

☐

MULTI-FAMILY (DUPLEX, TRIPLEX, ETC...)

☐

CONDOMINIUM

☐

COMMERCIAL IMPROVEMENT WITH LIVING QUARTERS

2002
34-272-08

THE FOLLOWING SOURCES ARE SUBJECT TO REVIEW TO DETERMINE RESIDENCY.

IDAHO RESIDENTIAL INCOME TAX RETURN

IDAHO VEHICLE REGISTRATION

IDAHO VOTER REGISTRATION

IDAHO DRIVERS LICENSE

Check One:

☒

I AM THE OWNER/OCCUPANT AND USED THIS PROPERTY AS MY PRIMARY DWELLING PLACE BY APRIL 15TH.

☐

I AM THE OWNER/ OCCUPANT OF A NEWLY CONSTRUCTED HOME OR MANUFACTURED HOME AND OCCUPIED THE DWELLING ON THE DATE LISTED ABOVE.

I HEREBY STATE THAT I HAVE NOT MADE APPLICATION ON ANY OTHER PROPERTY OR IN ANY OTHER COUNTY IN THE STATE OF IDAHO. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE.

DATE: 2/7/02 SIGNATURE: Bill Johnson PHONE: 683-2256

DATE: _____ SIGNATURE: _____ PHONE: _____

APPLICATION MUST BE RETURNED BY APRIL 15TH

(Except in the case of a newly constructed residence)

JOHNSON PIN RP54N03W230450A

