

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 95-15242Date Received: 5/31/11Receipt No: ND27369Received By: K

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) J. RUSSELL LOWRY Phone 208 686 1274Mailing Address 270 LOWRY RD PLUMMER ID Zip 83851
Street or Box City State2. Date of Priority: (Only one per claim) 09-01-1942
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 46N, Range 04W, Section 33
NW 1/4 of NE 1/4, or Govt. Lot _____ BM. County of BENEFICIALParcel (PIN) no. 1701 AAdditional points of diversion if any: NE 1/4 NE 1/4 (N 1/2 NE 1/4)

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 HAND DUG 4X4X4 LOCATED BY DOWNSING PIPELINE CATCH BASINSMALL POND HAND PUMP RECESSED 1966

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

For DOMESTIC purposes from 1-1 to 12-31 amount 04 cfs () or AFY ()For STOCKWATER purposes from 1-1 to 12-31 amount 027. Total Quantity claimed 06 cfs () or AFY ()

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

Stockwater and Number of livestock) 50 LIVESTOCK RECREATIONFIRE PROTECTION

SCANNED
MAY 31 2011

9. Location of Place of Use is: Township 46N, Range 04W, Section 33,
NW 1/4 of NE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 1701A

for (Check One) Domestic () Stock () Domestic and Stock () If different than shown in Item 4

Additional places of use, if any NE 1/4 NE 1/4

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

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.

_____ or None ()

13. Remarks:

HAND DUG WELL LOC BY DOWNSING PIPELINE TO PONDS HAND PUMP
RECEIVED 1966

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: MAP OVER

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) J Russell Loney Date: 05-31-2011

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:

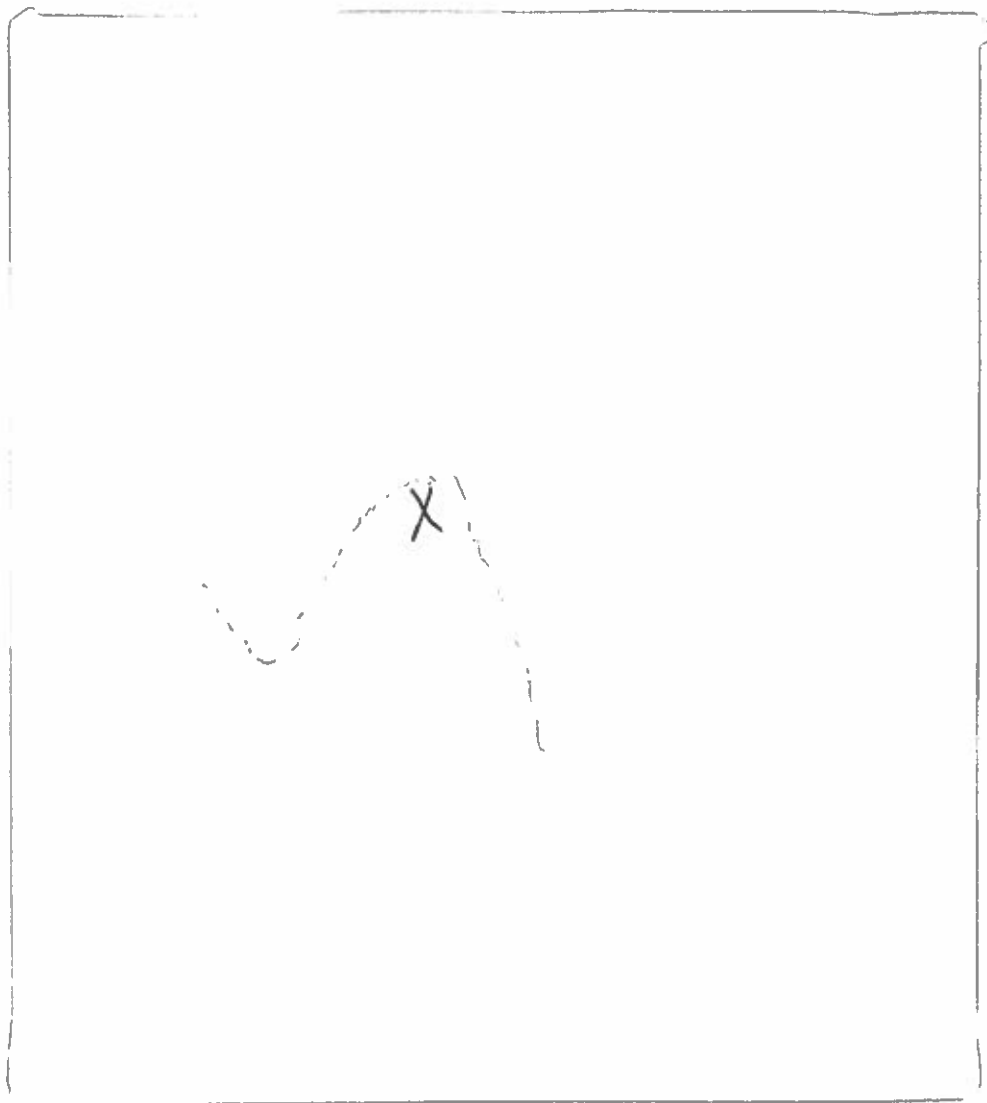
Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Last Name _____ Identification No. _____

SCANNED
MAY 31 2011



NW 1/4 NE 1/4 S 33

N

