

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: 95-16303

Date Received: 11/22/2011

Receipt No: T094335

Received By:

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

RACHAEL LABENDER
908 GRANITE LOOP RD
ATHOL ID 83801

Phone: (208) 899-8257

* Kander mays
4-06-18

2. Date of Priority: ~~40/2/4002~~

1970 (SEE ATTACHED TAXLOT INFO)

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
54N	03W	23	SW SW		BONNER	

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	0.01	0

7. Total Quantity Appropriated is: 0.01 C.F.S. and/or 0 A.F.A.

8. Non-Irrigation uses:

Number of Homes: 1	Water Use	Type Of Stock	Number Of Stock
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9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
54N	03W	23	NW SW		DOMESTIC	
			SW SW		DOMESTIC	
Section Acres						
Total Acres						

10. Place of use in counties: BONNER

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

12. Other Water Rights Used:

13. Remarks:

95-16303

1/31/2012

Priority date description: This is the day of the well report permit 96-92-n-224

Description of use: Water Use Description

DOMESTIC

14. Basis of Claim: Beneficial Use

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 notice in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I/We do X do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Karen Mungro Date: 4-06-18

Date: _____

For Organizations: I do solemnly swear or affirm under penalty or 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 _____

Please print name

Identify from: ☐ Taxlots

☐ Taxlots

☒ LABENDER, THEODORE F

Location: 2,300,590.165 1,871,028.886 Meters

Field	Value
ID	8417515
UPDATED	6/29/2017
PIN	RP54N03W236150A
OWNER	LABENDER, THEODORE F
ADDRESS1	908 GRANITE LP RD
ADDRESS2	
CITY	ATHOL
STATE	ID
ZIPCODE	83801
P_ADDRESS	908 GRANITE LP
P_ZIPCODE	83809
SUB_NAME	
LEGAL1	23-54N-3W TAX 21
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	0.5
COUNTY	Bonner
SOURCE	<null>
YEAR_BUILT	1970

Identified 1 feature

WATER Right change DATE