

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS**

RECEIVED
APR 26 2019

IDWR/NORTHERN

**IN RE THE GENERAL ADJUDICATION OF RIGHTS TO THE USE OF
WATER FROM THE PALOUSE RIVER BASIN WATER SYSTEM**

CIVIL CASE 59576

NUMBER:

Ident. Number: 87-7004

Date Received: 4-26-2019

Receipt No.: N034242

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
CITY OF POTLATCH	P.O. BOX 525	POTLATCH	ID	USA	83855

2. Date of Priority:

Date	Explanation
5/13/1969	This date is what is printed on the State of Idaho, Department of Water Administration, License of Water Right, issued the 21st day of May, 1973.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
41N	05W	2	1	NE	NE	LATAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
MUNICIPAL	-	-	Municipal water supply for the City of Potlatch.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
MUNICIPAL	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
MUNICIPAL	0.780	0.00	0.0

Totals:

CFS	AF	KW
0.780	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
MUNICIPAL	41N	05W	2	NE	NE	LATAH	-	-

9. Basis of Claim:

Basis	WaterRight
License	87-7004

10. 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 Palouse 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 under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
 _____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

MAYOR of CITY OF POTLATCH, ID
 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 David L Brown Date 4/17/19

Title and Organization MAYOR CITY OF POTLATCH, ID

Please print name

Well #1 - Ridge Well
Source # E 0005447

Tag # D

Well Construction

Claim No. _____



STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

CLAIM TO A WATER RIGHT

101'
AESpray Well Drilling

Under the provisions of Section 42-243, *Idaho Code*, any person claiming a water right established by diversion and application of water to beneficial use must file a claim with the Department of Water Resources. **The filing of this claim does not confirm the water right claimed.** Water rights represented by a valid permit, license, decree, or previous claim are exempt from this requirement, as are uses of water for domestic purposes as defined in Section 42-111, *Idaho Code*. A filing fee must be submitted with this claim. See the instruction sheet to determine the appropriate fee.

Notice is hereby given that CITY OF POTLATCH
(Name of Claimant)
Mailing Address: P.O. Box 525, POTLATCH, ID 83855
Telephone No: (208) 875-0708 Email: potlcity@potlatch.com

claims a right to the diversion and beneficial use of surface or ground water. The extent and nature of said claim is as follows:

- Fred Meckel - Domestic -

1. Date of Priority: (When the water was first applied to beneficial use) AUGUST 23, 1968
A claim is not acceptable for the use of surface water with a priority later than May 20, 1971. A claim is not acceptable for the use of ground water with a priority date later than March 25, 1963, unless the water is used for domestic purposes as defined in Section 42-111, Idaho Code.

2. Describe the source of water: (Name of stream, lake, spring, etc., or ground water) Ground water tributary to 387-4800

3. Describe the purpose for which the water has been used and the time during the year when you have used the right claimed:

(cfs or af)	(Irrigation, Domestic, Stock, Etc.)	(Both dates inclusive) (MM/DD)	(MM/DD)
Quantity <u>50 gpm</u>	Use <u>Municipal</u>	Period of Use From <u>01/01</u>	to <u>12/31</u>
Quantity _____	Use <u>Municipal</u>	Period of Use From _____	to _____
Quantity _____	Use _____	Period of Use From _____	to _____
Quantity _____	Use _____	Period of Use From _____	to _____

4. _____ TOTAL QUANTITY USED.
(cfs or af)

5. A) Location of point of diversion is NW 1/4 of SE 1/4 of _____, Govt. Lot _____
Sec. 12 Township 41 Range 5W B.M., LATAH County; additional points of diversion, if any: N/A

B) Describe means of diversion of water: (Pump and pipeline, well, diversion dam, reservoir, length of ditch etc.). Give sizes and capacities. Be specific. Describe any changes in the system and give the date of the change.

Size of pump?
Any changes?

Ask Tom?

1970
2008

When use this well?

Travis Uhlenkott

6. A) Describe the place of use within each 40-acre tract in the appropriate box using the symbols listed below. If the use is for irrigation, describe the location by listing the number of irrigated acres within each 40-acre tract.

D - domestic, S - stockwater, M - municipal, C - Commercial, I - Industrial, X - other

Twp	Rge	Sec	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
41	SW	120								M								M	1.12

TOTAL ACRES 1.12

- B) If water is used for purposes other than irrigation, fully describe the use. Be specific.

This water is for domestic municipal drinking water for the City of Pottlatch.

NOTE: Include here the type and number of stock watered: N/A

7. Remarks: N/A

8. **Map** -- Attach an 8½"x11" map clearly identifying the point of diversion and the place of use by 40-acre subdivisions, section, township and range of the public land survey system. (A photocopy of a USGS 7½ minute topographic quadrangle map is preferred.) Attach an **aerial photograph** of the place of use if available.

State of _____ }
County of _____ } ss.

Be it known that the undersigned, being duly sworn, deposes and says that he, she, they subscribed the forgoing claim to a water right, together with all attached information, and that the matters and facts therein are true to the best of the affiant's knowledge.

Claimant's Signature (and title if claim is for an organization)

Sworn to before me this _____ day of _____, _____.

Notary Public

Residing at: _____

My commission expires: _____

FOR DEPARTMENT USE ONLY

Received by _____ Date _____
Prelim. check by _____ Date _____
Fee _____ Receipt # _____
Receipt prepared by _____ Date _____

Published in _____
Publication dates _____
Publication checked by _____ Date _____
Exceptions filed by _____

Department of
Water Resources

Logged in: PotlatchCity

IDWR Home

History

Contact Us

Logout

Claim ID: 87-7004 status

Getting Started

Claimant Information

Source & Point of Diversion

Purpose of Use

Place of Use

Priority Date

Quantity

Season of Use

Finalize and Submit

Finalize and Submit Help

Finalize and Submit

Your assigned claim number is **87-7004**.

Record this number for your reference. IDWR uses this claim number to track all claim activity and will use this claim number in all correspondence.

[Click here to preview and/or print your claim for your records.](#)

The filing fee for your claim is **\$128.00**.

Note: Claims are not valid until filing fees are received or you see an electronic confirmation.

You must read "How you will receive notice in the Palouse River Basin Water System Adjudication" before you submit your claim. [Click here](#) to view "How you will receive notice in the Palouse River Basin Water System Adjudication."

The docket sheet procedure is available on the Court's website and may be viewed by [clicking here](#).

Select one of the options below: (Note: Selecting one of the payment options will submit your claim. Please make sure to review your claim and make any necessary changes before selecting a payment option.)

Pay Online:

Submit claim online and pay online using a credit or debit card. You will be redirected to Access Idaho and must wait for confirmation information on the Access Idaho webpage after your payment processing is complete. PLEASE NOTE: You will need to mail any support documents (maps, photos, affidavits, etc.) to IDWR. Include the claim number shown above on all correspondence or it may be lost.

[Click here to submit claim to IDWR and continue to Access Idaho.](#)

Pay In Person:

Submit claim online and pay in person using cash or check at an IDWR office. PLEASE NOTE: IDWR offices cannot accept debit or credit card payments and cannot make change. You do not need an appointment to pay claim fees but, if you wish to meet with IDWR personnel regarding your claim, you need to schedule an appointment ahead of time. Bring all supporting documents (maps, photos, affidavits, etc.) with you.

[Click here to submit claim to IDWR and print claim stub.](#)

Pay By Mail:

Submit claim online and pay by mail using a check. You will need to print and mail a claim stub along with your check to IDWR. Include any supporting documents (maps, photos, affidavits, etc.) in your mailing. Include the claim number shown above on all correspondence (including checks) or it may be lost.

[Click here to submit claim to IDWR and print claim stub.](#)

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