

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

Ident. Number: 87-10210

Date Received: 4/26/2019

Receipt No: T106730

Received By:

**NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW**

1. Name of Claimant(s)

GREGORY SCORSONE Phone:(585) 329-6756
PO BOX 66
VIOLA ID 83872
KATHLEEN LAFORTUNE Phone:(208) 301-0690
PO BOX 66
VIOLA ID 83872

2. Date of Priority: 7/17/2014

3. Source: GROUND WATER Tributary to:
 UNNAMED STREAM NORTH FORK PAYETTE RIVER

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
41N	05W	20	SE NE		LATAH	
41N	05W	20	SE NE		LATAH	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From</u>	<u>To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1 /1	12/31	0.02	1.2

7. Total Quantity Appropriated is: 0.02 C.F.S. and/or 1.2 A.F.A

8. Non-irrigation uses:

Number of Homes: 1	<u>Water Use</u>	<u>Type Of Stock</u>	<u>Number Of Stock</u>
--------------------	------------------	----------------------	------------------------

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
41N	05W	20	NE NE		DOMESTIC	
						Section Acres
						Total Acres

10. Place of use in counties: LATAH

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

87-10210

5/3/2019

12. Other Water Rights Used:

13. Remarks:

Priority date description: Drilled the well in September of 2013. Building permits approved on 7-17-2014. That is when we began pumping water for construction and for watering our 2 horses.

Description of use: Water Use

Description

DOMESTIC

domestic, irrigation of less than one half acre, stock water for horses and chickens

14. Basis of Claim: Beneficial Use

15. Signature(s)

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): _____ Date: _____

_____ 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