

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 PALOUSE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 59576

Claim ID: 87-10149

Date Received: _____

Receipt No: ND34180

Claim Fee: _____ By: _____

ATT: KAILA
SAVAGE

Amended

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

RECEIVED

MAY 02 2019

IDWR / NORTH

PHONE NUMBER BLOCKER PRESS 0

Please type or print clearly

1. Name of claimant(s) BRIAN WORDEN / WILMA WORDEN H/W Phone (208) 875 0251Mailing address 1151 QUEENER LN PRINCETON ID Zip 83857

Street or Box

City

State

Email address (optional) ~~BRIDGES~~ ALLSMALLCASE BRIANSRANCH@aol.com2. Date of priority: (Only one per claim) 7/14/2005 (Explain priority date selected in Remarks)
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 41N, Range 03W, Section 32
SW1/4 of SW1/4, or Govt. Lot NONE BM, County of LATAHParcel no. RP41N03W324202A

Additional points of diversion, if any: _____

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 PIPED TO 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 01/01 to 12/31 amount 0.03 cfs (✓) or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.03 cfs (✓) or AFY ()8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
DOMESTIC USE ONE HOME

9. Location of place of use is: Township SWNE, Range 03W, Section 32
SENE 1/4 of 9 1/4, Govt. Lot _____ BM, Parcel no. RP41N03W324202A
for (check one) Domestic (✓) Stock () Domestic and Stock ()
if different than shown in Item 4

Additional places of use, if any _____

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

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 (include an explanation of the priority date selected):
HOUSE HOOKED TO WELL

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 Palouse River Basin Water System 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: 1

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) Brian C. Worden Date: 4/29/2019
Welma L. Worden Date: 4/24/2019

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

_____ of _____
Agent's title (Please print) Name of organization (Please print)
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____
Printed Name of Authorized Agent _____

16. Notice of Appearance:
Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on 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 _____

Name of claimant(s) BRIAN WORDEN Claim ID _____



MAKE CHECKS PAYABLE TO:

Latah County Tax Collector
P.O. Box 8068
Moscow, ID 83843
PHONE: (208)883-2296

2018 TAX BILL / RECEIPT

PARCEL NUMBER: RP41N03W324202A **BILL NUMBER:**

CODE AREA: 49-0000

BANK CODE:

TOT ACRES 75.640

LAND
IMPRVMNT
TOT MKT
HO EXEMPT
NET MKT

7510 RP41N03W324202A **AUTO**5-DIGIT 83843 16



WORDEN BRIAN
& WORDEN WILMA H/W
1151 QUEENER LN
PRINCETON ID 83857-9748

PROPERTY ADDRESS:

1151 QUEENER LN 83857

LEGAL DESCRIPTION:

75.64 AC TAX #5318 SENW & SWNE
32 41 3
STATEMENT OF INTENT

PARCEL LOCATION FOR CSRBA CLAIM

