

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: 87-10181

Date Received: _____

Receipt No: 2034183

Claim Fee: _____ By: _____

RECEIVED

MAY 06 2019

IDWR / NORTH

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

Please type or print clearly

- Name of claimant(s) BART J AND/OR MARGARET M RASMUSSEN Phone (208) 882-2853
Mailing address 1016 CEDAR GROVE LANE MOSCOW ID Zip 83843
Street or Box City State
Email address (optional) _____
- Date of priority: (Only one per claim) 2/1/1980 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water (✓) or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 40N, Range 05W, Section 25,
SE 1/4 of SE 1/4, or Govt. Lot _____ BM, County of LATAH;
Parcel no. RP40N05W259015
Additional points of diversion, if any: T40N R05W SEC25 NE 1/4 OF SE 1/4 (SEE MAP)
If available, GPS coordinates: _____
- 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.
TWO WELLS: 1 @ 240' DEEP; 1 @ 260' DEEP; EQUIPPED WITH SUBMERSIBLE PUMPS PIPED TO 1500
GALLON CONCRETE HOLDING TANK WITH JET PUMP AND PRESSURE TANK PIPED TO HOUSE
- 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 0.04 cfs (✓) or AFY ()
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.04 cfs (✓) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
DOMESTIC SINGLE HOUSEHOLD

9. Location of place of use is: Township 40N, Range 05W, Section 25,
NE 1/4 of SE 1/4, Govt. Lot _____ BM, Parcel no. SAME
If different than shown in Item 4
for (check one) **Domestic** (✓) **Stock** () **Domestic and Stock** ()

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):
THE PRIORITY DATE WAS THE PURCHASE DATE OF THE PROPERTY WHEN WELL USE BEGAN

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: _____

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) Bart J Rasmussen **Date:** 5/2/19
Margaret "Peggy" M Rasmussen **Date:** 5/2/19

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) BART J AND/OR MARGARET M RASMUSSEN Claim ID _____

Identify

Identify from: Tax Parcels

[-] Tax Parcels

[+] RASMUSSEN, BART J

Location: 2,278,836.083 1,734,652.872 Meters

Field	Value
ACRES	9.5
ADDRESS1	1016 CEDAR GROVE LANE
ADDRESS2	
CITY	MOSCOW
COUNTY	Latah
ID	11138628
LEGAL1	7.12 AC TAX #3032 SESE
LEGAL2	& .95 AC TAX #4836
LEGAL3	25 40 5
LEGAL4	
LEGAL5	
LEGAL6	
OWNER	RASMUSSEN, BART J
P_ADDRESS	1016 CEDAR GROVE LN
P_ZIPCODE	83843
PIN	RP40N05W259015
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	2/20/2019
YEAR_BUILT	1983
ZIPCODE	83843

Identified 1 feature

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