

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: 87-10707Date Received: 5-16-2019Receipt No: N034533Claim Fee: 25.00 By: _____

RECEIVED

MAY 16 2019

DEPT. OF WATER RESOURCES

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) RONALD J AND KATHLEEN M. VIETMEIER Phone (208) 874-2968
Mailing address 2256 W.A. St. Moscow ID Zip 83843
Street or Box City State
Email address (optional) APPLEBRANCHRANCH@GMAIL.COM
- Date of priority: (Only one per claim) SEP 14, 1984 (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 39N, Range 6W, Section 12,
SE 1/4 of NW 1/4, or Govt. Lot _____ BM, County of LATAH
Parcel no. RP 39N 06W 12 4665A
Additional points of diversion, if any: _____
If available, GPS coordinates: N 46 x 44 x 16' W 117 x 02 x 00' (NAD 27)
- 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 - TANK MARKED AS DEPTH 128
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For DOMESTIC purposes from 1-1 to 12-31 amount 0.04 cfs (x) or AFY ()
Month/Day Month/Day
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)
1 HOME

9. Location of place of use is: Township 39N, Range 6W, Section 12,

SE 1/4 of NW 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):

DATE WELL ATTACHED TO TRAILER 1984

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: 2

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) [Signature] Date: 5/16/19

Date: _____

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

Agent's title (Please print) _____ of _____
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) _____ Claim ID _____

3750

0135

2254

4650

2256

4665

3900

WELL
HOME

001G

001F

2600

0201
0202
0204

2300

001B

0195

A

2301

0020

2470

0010

8120

Moscow

7510

5265

WARBONNET

WARBONNET

10

10

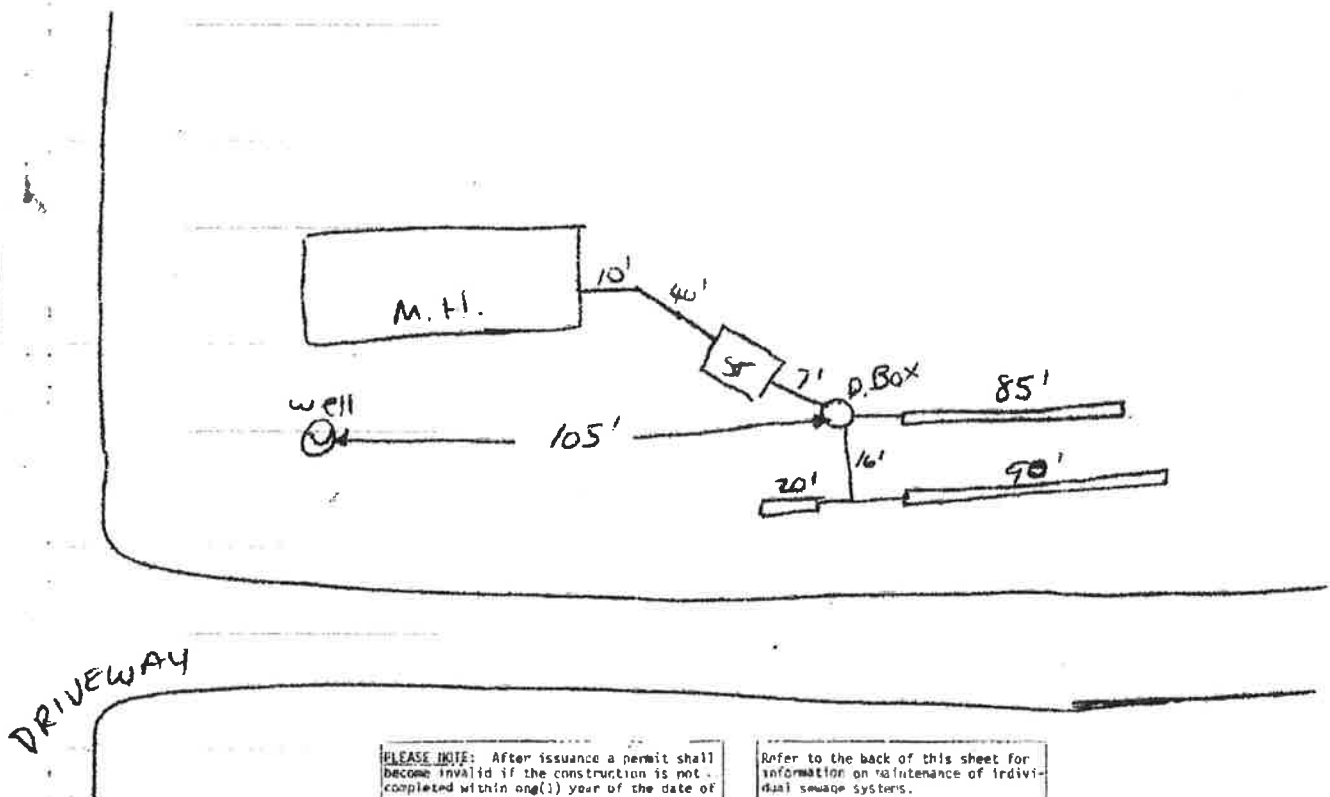
10

**NORTH CENTRAL DISTRICT HEALTH DEPARTMENT
INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT**

Permit No. 60(84) Date 9-14-84
 Installation for Victor Montgomery at Sec. 12 Twp 39 R6W
(Name) (Legal description of property)
 Address of Installation 5062 Highway 8 - Moscow
 No. Living Units 1 Bedrooms People Served 2 Water Supply—Private ☒ Public Applicant is: Owner ☒ Contractor Other
 FHA FARM HOME VA CONV. EXISTING NO.
 Septic Tank 1000 gal. Perc. Rate Min./in. Min. Depth to Ground Water ft.
 Effluent Disposal: Effective Area Required 600 sq. ft. Soil System:
 Field Drain ☒ Absorption Bed Standard ☒ Modified Seepage Pit Dimensions
 Distance from Disposal Area to:
 Property Lines: Front 5 ft. Back 5 ft. Side 5 ft. Dwelling Foundation 20 ft. Well 100 ft.
 Surface Water N/A ft. Nearest Neighbor's Well 100 ft. Plot Plan Submitted and Approved Septic Tank ft.
 Remarks:
 Applicant Permit Issued by R. Gabriel Paid ☒ Bill No Fee
 Address

INSPECTION: Septic Tank Size 1000 Standpipe Depth to Manhole
 Distance from Septic Tank to: Dwelling Foundation 50 ft. Well 85 ft. Nearest Neighbor's Well N/A ft.
 Effluent Disposal: Effective Area 585 sq. ft.
 Field Drain ☒ Absorption Bed Standard ☒ Modified Seepage Pit Dimensions
 Pipe Size 4" No. of Lines 2 Length 195 Depth
 Distance from Disposal Area to:
 Property Lines: Front ft. Back ft. Side ft. Dwelling Foundation ft. Well ft.
 Surface Water ft. Water Service Piping ft. Depth to Gravel ft. Nearest Neighbor's Well ft.
 Approved ☒ Not Approved Inspected by R. Gabriel Installed by MEL'S EXCAVATING
(Date)
 Remarks AS BUILT DRAWINGS.

Applicant's sketch of house, proposed sewage layout and all adjacent wells (dimension between all components) --



PLEASE NOTE: After issuance a permit shall become invalid if the construction is not completed within one(1) year of the date of issuance.

Refer to the back of this sheet for information on maintenance of individual sewage systems.