

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: 87-10877

Date Received: 5-20-19

Receipt No: N084613

Claim Fee: \$25 By: Ja

RECEIVED

MAY 20 2019

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

IDWR / NORTH

Please type or print clearly

and/or Linda K. Norton

1. Name of claimant(s) Steven L. Norton Phone (208) 882-7194Mailing address 1178 Flannigan Creek Rd Zip 83872
Street or Box City StateEmail address (optional) nortonsnl@gmail.com2. Date of priority: (Only one per claim) 1973 (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) Flannigan Creek Rd4. Location of point of diversion is: Township 41N, Range 05W, Section 35NW 1/4 of NW 1/4, or Govt. Lot _____ BM, County of LatahParcel no. RP41N05W353055A

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 with pipeline to house

6. 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 0.02
Month/Day Month/Day cfs (✓) or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.02 cfs (✓) or AFY ()

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)

one home

9. Location of place of use is: Township 41N, Range 05W, Section 35,
NW 1/4 of NW 1/4, Govt. Lot _____ BM, Parcel no. SAME
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? _____

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):
well was completed and put to use.

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) [Signature] Date: 5/16/2019
[Signature] Date: 5/16/2019

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) _____ Claim ID _____

FROM RAY McPHERSON WELL DRILLING

RR1 BOX 332 PULLMAN, WASH 99163

TO STEVE NORTON

9-8

1973

STREET _____

ORDER NO. _____

CITY VIOLA

ZONE _____

STATE IDA

TERMS _____

75	ft	8" Drilling	@	9.00/ft	675.00
11	ft	8" Casing	@	3.75/ft	41.25
1	-	8" Drive Pipe	@	45. each	45.00
					<u>\$761.25</u>
3% Idaho Sales Tax on material					2.25
					<u>\$763.50</u>
paid ~ 9/73					→ 403.50
paid 10/5/73					→ 360.00
Balance Due as of 10/6/73					→ 30.00
					<u>330.00</u>