

**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 59576
NUMBER:**

Ident. Number: 87-10631

Date Received: 6/12/19

Receipt No.: N034939

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JUN 12 2019

IDWR / NORTH

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
JOYCE RODMAN	8810 W 1ST AVE	KENNEWICK	WA	USA	99336

2. Date of Priority:

Date	Explanation
3/1/1934	Original owners, the Matson Family, built house and operated stock on their land.

3. Source:

Source	Tributary	Type
UNNAMED STREAM	FLANNIGAN CREEK	INSTREAM BEGINNING
UNNAMED STREAM	FLANNIGAN CREEK	INSTREAM ENDING

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
41N	05W	26		NW	NW	LATAH
41N	05W	26		NE	NW	LATAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock		Description
STOCKWATER		Type of Stock	Number of Stock	Instream stock water use.
		Cattle	26 - 50	

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
STOCKWATER	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.020	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
STOCKWATER	41N	05W	26	NE	NW	LATAH	-	-
STOCKWATER	41N	05W	26	NW	NW	LATAH	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. Signature(s):

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Palouse River Basin 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): Joyce Rodman Date: 6-12-19
 _____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of 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

