

**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: 87-10659**

**Date Received:**

**Receipt No.: 11035019**

**RECEIVED**  
**JUN 19 2019**  
**IDWR/NORTHERN**

**1. Name of Claimant(s):**

| Name        | Address                 | City     | State | Country | Postal Code |
|-------------|-------------------------|----------|-------|---------|-------------|
| TECLA BLOOD | 1035 DUFFIELD FLAT ROAD | POTLATCH | ID    | USA     | 83855       |

**2. Date of Priority:**

| Date       | Explanation           |
|------------|-----------------------|
| 12/31/1973 | Year house was built. |

**3. Source:**

| Source       | Tributary            | Type |
|--------------|----------------------|------|
| GROUND WATER | TRIBUTARY NOT NEEDED |      |

**4. Point Of Diversion:**

| Township | Range | Section | Gov Lot | QQ | Q  | County |
|----------|-------|---------|---------|----|----|--------|
| 42N      | 06W   | 36      |         | NW | SE | LATAH  |

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

| Water Use | Number Of Homes | Stock | Description               |
|-----------|-----------------|-------|---------------------------|
| DOMESTIC  | 1               | -     | shared well with 87-10658 |

**6. Season(s) of Use:**

| Water Use | From Month/Day | To Month/Day |
|-----------|----------------|--------------|
| DOMESTIC  | 1 / 1          | 12 / 31      |

**7. Quantity:**

| Water Use | CFS   | AF   | KW  |
|-----------|-------|------|-----|
| DOMESTIC  | 0.040 | 0.00 | 0.0 |

**Totals:**

| CFS | AF | KW |
|-----|----|----|
|-----|----|----|

|       |      |  |
|-------|------|--|
| 0.040 | 0.00 |  |
|-------|------|--|

**8. Place of Use:**

| Water Use | Township | Range | Section | QQ | Q  | County | Gov Lot | Acreage |
|-----------|----------|-------|---------|----|----|--------|---------|---------|
| DOMESTIC  | 42N      | 06W   | 36      | NW | SE | LATAH  | -       | -       |
| DOMESTIC  | 42N      | 06W   | 36      | SW | SE | 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): Tala A. Blood Date: 6-15-19  
 \_\_\_\_\_ 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