

**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: 87-10594

Date Received: 6-13-2019

Receipt No.: N035031

RECEIVED
JUN 13 2019
DEPT. OF WATER RESOURCES

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
W QUINTON HELLINGER	1070 DAILEY ROAD	POTLATCH	ID	USA	83855-9799
M MARIE HELLINGER	1070 DAILEY ROAD	POTLATCH	ID	USA	83855-9799

2. Date of Priority:

Date	Explanation
1/1/1900	Current house built in 1955 and I know that the well was there at that time. But the old timer told me that there was a previous well that was not far from the current well that dated back to the turn of the century. Walls of the original well house was filled with vermiculite which started being used in the late 1800s.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
42N	05W	19	1	NW	NW	LATAH

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

Water Use	Number Of Homes	Stock		Description
DOMESTIC	1	-		
STOCK WATER	-			
		Type of Stock	Number of Stock	
		Cattle	1 - 10	

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31
STOCK WATER	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.040	0.00	0.0
STOCKWATER	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.060	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	42N	05W	19	NW	NW	LATAH	1	-
DOMESTIC	42N	06W	24	NE	NE	LATAH	-	-
STOCKWATER	42N	05W	19	NW	NW	LATAH	1	-
STOCKWATER	42N	06W	24	NE	NE	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: 0

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): M. Marie Illinger Date: 6-13-2019
 _____ 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