

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

Ident. Number: 87-11480
Date Received: 8/13/2019
Receipt No: N035371
Claim Fee: 25.00
Received By: DL

RECEIVED

AUG 13 2019

IDWR/NORTHERN

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

1. Name of Claimant(s)

JUANITA F MANTZ
C/O CHRISTAL OR TIM MANTZ
PO BOX 327
POTLATCH ID 83855

Phone: (208) 875-1673

2. Date of Priority: 2/15/1967

3. Source:

PALOUSE RIVER
PALOUSE RIVER

Trib. to:

SNAKE RIVER
SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
41N	03W	9	SW SE		LATAH	Beginning
41N	03W	8	SW NE		LATAH	Ending

5. Description of diverting works:

Instream Stockwater

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.02		

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

45 head cattle

9. Place of use:

STOCKWATER within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
41N	03W	8	SW		NE		
41N	03W	8	SE		NE		
41N	03W	9	SW		NW		
41N	03W	9	SE		NW		
41N	03W	9	NE		SW		
41N	03W	9	SE		SW		
41N	03W	9	SW		SE		

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

None

12. Remarks:

Priority Date Explanation:

13. Basis of Claim: Beneficial Use

14. 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): Christa Mary for Juanita Mary P.O.A. Date: 8-13-19

_____ Date: _____

