

**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: 87-11506

Date Received: 8/15/2019

Receipt No:

Claim Fee:

Received By:

N035382
25.00
SL

**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)

GERALD W SWATMAN
3517 HWY 6
PRINCETON ID 83857

Phone: (208) 875-9173

AND/OR

PATRICIA L SWATMAN
3517 HWY 6
PRINCETON ID 83857

Phone: (208) 875-9132

2. Date of Priority: 5/20/1988

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
41N	04W	10	SW NW		LATAH	

5. Description of diverting works:

WELL, 75' DEEP, WITH 3/4 HP PUMP AND PIPELINE TO HOME, SOME LAWN

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	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:

1 HOME, SOME LAWN

9. Place of use:

DOMESTIC within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
41N	04W	10	SW		NW		

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:

Per neighbor's recollection.

13. Basis of Claim: Beneficial Use

14. Signature(s)

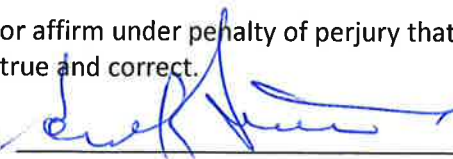
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the PALOUSE River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

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):



Date:

8-15-2019

Patricia L. Swatman Date: 8-15-2019



PARCEL # RP 41N 04W 103782A

Township 41N

Range 4W

Section 10

Quarter

SW Quarter of NW Quarter

1988

NORTH CENTRAL DIST HEALTH 882-7506

~~206 919-9255~~

Albert Rogers

Janet ¹⁹⁸⁷ 1988

Nancy Bicker

James & Judy

McKenny

1983

0071

882-5710