

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: 87-11689

Date Received: 8/28/2019

Receipt No: T107621

Received By:

**NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW**

1. Name of Claimant(s)

KURT LEMMON Phone:(509) 338-2634
3085 HIGHWAY 95 S
GENESEE ID 83832
LANI LEMMON Phone:(509) 330-1411
3085 HIGHWAY 95 S
GENESEE ID 83832

2. Date of Priority: 4/8/1999

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
38N	05W	27	SE NW		LATAH	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1 /1 12/31	0.03	0

7. Total Quantity Appropriated is: 0.03 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses:

Number of Homes: 1	<u>Water Use</u>	<u>Type Of Stock</u>	<u>Number Of Stock</u>
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9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
38N	05W	27	SW NE		DOMESTIC	
			SE NW		DOMESTIC	
					Section Acres	
					Total Acres	

10. Place of use in counties: LATAH

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

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9/11/2019

12. Other Water Rights Used:

13. Remarks:

Priority date description: We purchased the home at that date with full water rights. The homestead was established prior to 1908 when the home was originally built, but no easily accessible proof of that date other than pictures for evidence.

Description of use:	<u>Water Use</u>	<u>Description</u>
	DOMESTIC	AVERAGE OF 400-500 GALLONS PER DAY OF DOMESTIC WATER USE WITH LAUNDRY, TOILETS, BATHING, DISHES AND LAWN SPRINKLERS. OUR WELL PRODUCES ABOUT 15 GALLONS PER MINUTE.

14. Basis of Claim: Beneficial Use

15. Signature(s)

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

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