

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

Claim ID: 87-11932
Date Received: 4-3-19
Receipt No: 1035578
Claim Fee: 2500 By: 19

RECEIVED

SEP 03 2019

IDWR/NORTH

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

Please type or print clearly

- Name of claimant(s) SHANE W ANDERSON Phone (208) 818-4292
Mailing address 1144 MCBRIDE RD POTLATCH ID Zip 83855
Street or Box City State
Email address (optional) truckershane21@yahoo.com
- Date of priority: (Only one per claim) 7/1/1942 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water (✓) or Other () (a)
which is tributary to (b)
- Location of point of diversion is: Township 41N, Range 05W, Section 10,
SW 1/4 of SE 1/4, or Govt. Lot BM, County of Latah;
Parcel no. RP41N05W108700
Additional points of diversion, if any: SWSE-10-T41N R05W
If available, GPS coordinates:
- Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.
Hand Dug Well is located 100' southwest of home. The new well drilled in summer of 1979 is located 60' east of the house. Well, pump and pipeline to home and 5 hydrants for 2 head of stock, no lawn watering.
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from 1/1 to 12/31 amount 0.02 cfs (✓) or AFY ()
For purposes from to amount
- Total quantity claimed 0.02 cfs (✓) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
1 home, no lawn irrigation

9. Location of place of use is: Township 41N, Range 05W, Section 10,
SW 1/4 of SE 1/4, Govt. Lot _____ BM, Parcel no. _____
If different than shown in Item 4
for (check one) **Domestic** (✓) **Stock** () **Domestic and Stock** ()

Additional places of use, if any _____

10. In which county(ies) are lands listed above as place of use located? Latah

11. Do you own the property listed above as place of use? Yes (✓) No ()
If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
_____ or None (✓)

13. Remarks (include an explanation of the priority date selected):
Date the home was built and hooked up to the hand dug well. 2nd well supplements first well for a total of 9
gpm.

14. Basis of claim (check one) **Beneficial Use** (✓) **Posted Notice** () **License** () **Permit** () **Decree** ()
Court _____ Decree Date _____ Plaintiff v. Defendant _____
If applicable provide IDWR Water Right Number _____

15. **Signature(s)**
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Palouse River Basin Water System 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) [Signature] Date: 8-27-19

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Agent's title (Please print) _____ of _____, Name of organization (Please print) _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. **Notice of Appearance:**
Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) SHANE W ANDERSON Claim ID _____

Identify

Identify from: **Parcels**

Parcels

ANDERSON, SHANE WILLIAM

Location: 2,275,511.488 1,748,864.448 Meters

Field	Value
ACRES	9.1
ADDRESS1	1144 MCBRIDE ROAD
ADDRESS2	
CITY	POTLATCH
COUNTY	Latah
ID	11247589
LEGAL1	S 10.0 AC SWSE
LEGAL2	10 41 5
LEGAL3	
LEGAL4	
LEGAL5	
LEGAL6	
OWNER	ANDERSON, SHANE WILLIAM
P_ADDRESS	1144 MCBRIDE RD
P_ZIPCODE	83855
PIN	RP41N05W 108700
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	6/3/2019
YEAR_BUILT	1942
ZIPCODE	83855

RECEIVED
SEP 03 2019
IDWR / NORTH

