

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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Claim ID: 87-11953

Date Received: 8/30/19

Receipt No: C107530

Claim Fee: 25 By: [Signature]

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

RECEIVED

AUG 30 2019

DEPARTMENT OF
WATER RESOURCES

Please type or print clearly

- Name of claimant(s) DAVID SCHARNHORST Phone (509) 597-7766
Mailing address 1001 LINCOLN STREET COLTON WA Zip 99113
Street or Box City State
Email address (optional) _____
- Date of priority: (Only one per claim) JANUARY 1, 1920 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (x) (a) UN-NAMED CREEK
which is tributary to (b) THORN CREEK
- Location of point of diversion is: Township 37N, Range 5W, Section 18,
NW 1/4 of NW 1/4, or Govt. Lot _____ BM, County of LATAH;
Parcel no. RP37N05W180098
Additional points of diversion, if any: _____
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.

- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For STOCKWATER purposes from 01/01 to 12/31 amount .02 cfs (x) or AFY ()
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed .02 cfs (x) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
STOCK: 1-20 CATTLE +/- OR HOGS

9. Location of place of use is: Township 37N, Range 5W, Section 18,
NW 1/4 of NW 1/4, Govt. Lot _____ BM, Parcel no. RP37N05W180098
If different than shown in Item 4
for (check one) Domestic () Stock (X) 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 (X) 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 (X)

13. Remarks (include an explanation of the priority date selected):

ORIGINAL FAMILY HOMESTEAD. SETTLED APPROXIMATELY
(CONTINUOUS USE SINCE 1920) 01/01/1920

14. Basis of claim (check one) Beneficial Use (X) 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 Notice in the Snake River Basin Adjudication."

(b.) I/We do () do not (X) 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) David Scharnhorst Date: 08/25/2019

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)

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.

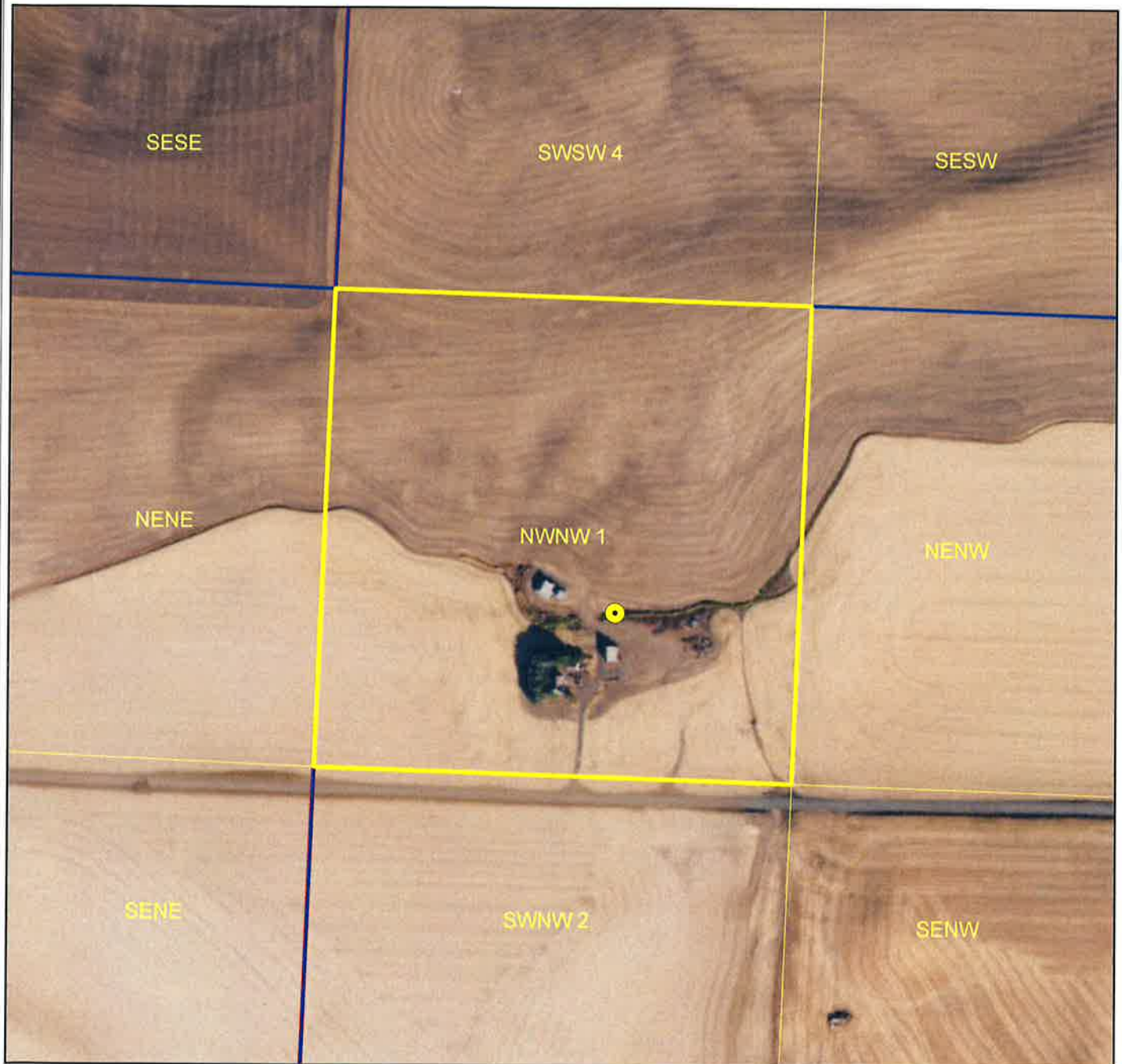
Signature _____ Date _____

Address _____

Name of claimant(s) DAVID SCHARNHORST Claim ID _____

State of Idaho
Department of Water Resources
Water Right Claim
87-11953 - SCHARNHORST

This map depicts the STOCKWATER place of use boundary and point of diversion for this water right at the time of this approval and is attached to this document solely for illustrative purposes.



-  Point of Diversion
-  Place Of Use Boundary
-  Sections
- QQ



0  Miles
0.25