

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: 87-11225

Date Received: 8/20/2020

Received By:

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

1. Name of Claimant(s)

SCOTT LYNAS Phone:(509) 330-0370
PO BOX 86
VIOLA ID 83872
DANIELLE LYNAS Phone:(509) 338-0272
PO BOX 86
VIOLA ID 83872

2. Date of Priority: 9/12/2014

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>
41N	05W	21	SW SW		LATAH	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From</u>	<u>To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
DOMESTIC	1 /1	12/31	0.04	0

7. Total Quantity Appropriated is: 0.04 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>
41N	05W	21	NW SW		DOMESTIC	
			SE SW		DOMESTIC	
			SW SW		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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12. Other Water Rights Used:

13. Remarks:

Priority date description: This is the year we purchased the property

Description of use:	<u>Water Use</u>	<u>Description</u>
	DOMESTIC	Household use

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