

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: 87-11331

Date Received: 7/25/2019

Receipt No: T107305

Received By:

RECEIVED
SEP 14 2020

AMENDED

IDWR / NORTH

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

LARRY J BLAIR
PO BOX 83
POTLATCH ID 83855
TAMMY M BLAIR
PO BOX 83
POTLATCH ID 83855

Phone:(208) 875-0268

Phone:(208) 875-0268

2. Date of Priority: 8/29/2005

3. Source: GROUND WATER

Tributary to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
43N	04W	20	SE SW		LATAH	

5. Description of diverting works:

6: Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1 /1	12/31	0.01	0

7. Total Quantity Appropriated is: 0.01 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses:

Number of Homes: 1	Water Use	Type Of Stock	Number Of Stock
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9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
43N	04W	20	SE SW LB,		DOMESTIC	
						Section Acres
						Total Acres

Larry Blair

10. Place of use in counties: LATAH

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

12. Other Water Rights Used:

87-11331

8/1/2019

13. Remarks:

Priority date description: Well was drilled on this date.

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

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):	<u>Larry James Blair</u>	Date: <u>9/2/20</u>
	<u>Harvey M Blair</u>	Date: <u>9/2/20</u>

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