

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: 87-11612

Date Received: 8/24/2019

Receipt No: T107527

Received By:

RECEIVED
SEP 23 2020

AMENDED

IDWR / NORTH

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

MALCOLM FURNISS
1825 ORCHARD AVE
MOSCOW ID 83843

Phone:(208) 882-7961

2. Date of Priority: 3/1/1964

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>
39N	05W	5	SW NE		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	0.04	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>
39N	05W	5	SW NE		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

12. Other Water Rights Used:

13. Remarks:

Priority date description: Based on date of well drilling as recorded in the records of Idaho
Department of Water Resources

87-11612

8/30/2019

Description of use: Water Use

Description

DOMESTIC

one household with one occupant including lawn and garden

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):

Washington Turner

Date:

9-20-2020

Date:

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

Title of Organization

That I have signed the foregoing document in the space below as

Title of 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