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JAN 13 2021

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO
IN AND FOR THE COUNTY OF TWIN FALLS

DEPARTMENT OF
WATER RESOURCES

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: 87-11276

Ident. Number: 87-4173

Date Received: 12/4/2020

Receipt No: N035118

Claim Fee:

Received By: _____

AMENDED

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

AMENDED

1. Name of Claimant(s)

LARRY TODD
1010 SCHULTZ RD
MOSCOW ID 83843

Phone: (208) 596-5171

CHRISTINA TODD
1010 SCHULTZ RD
MOSCOW ID 83843

Phone: (208) 596-5171

2. Date of Priority: 6/1/1960

3. Source: Trib. to:

~~UNNAMED STREAM~~

POND

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
40N	05W	21	SE SE		LATAH	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
STOCKWATER	01/01	12/31	0.02		
STOCKWATER STORAGE	1/01	12/31			10

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or 10 A.F.A.

8. Non-irrigation uses:

9. Place of use:

STOCKWATER STORAGE within LATAH County

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>¼</u>	<u>of</u>	<u>¼</u>	<u>Lot</u>	<u>Acres</u>
<u>40N</u>	<u>05W</u>	<u>21</u>	<u>SE</u>		<u>SE</u>		

STOCKWATER same as STOCKWATER STORAGE

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

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:

SOURCE OF WATER IS ACTUALLY RUNOFF FROM SURROUNDING FIELDS AND STORED IN A POND.

13. Basis of Claim: Statutory Claim

14. 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 PALOUSE River Basin 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): Therrell Todd Date: 1/7/2021
Christina Todd Date: 1-7-2021 (CT)