

**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 59576
NUMBER:
Ident. Number: 87-12259
Date Received:
Receipt No.:**

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DOUG GADWA	1400 SAND ROAD	MOSCOW	ID	USA	83843

2. Date of Priority:

Date	Explanation
1/1/1941	This has been a farm since the early 1900s and my neighbor moved in next door in 1941 and remembers the old barn down by the River. The River ran through the barn yard and the River watered the stock. We bought the farm from the Anderson family in 1985 when my daughter was born and have farmed it ever since.

3. Source:

Source	Tributary	Type
SOUTH FORK OF THE PALOUSE RIVER	SNAKE RIVER	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
39N	05W	19	1	NW	NW	LATAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
IRRIGATION	-	-	Sprinkler irrigation of seven acres for grazing or hay and water stock

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	6 / 1	9 / 1

7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	0.020	0.00	0.0

Totals:

CFS	AF	KW
0.020	0.00	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	8.6

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
IRRIGATION	39N	05W	19	NW	NW	LATAH	1	8.3
IRRIGATION	39N	06W	24	NE	NE	LATAH	-	0.3

9. Basis of Claim:

Basis
Beneficial Use

10. 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): _____ Date: _____
 _____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of 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