

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 CLARK FORK-PEND OREILLE RIVER BASIN WATER  
SYSTEM**

**CIVIL CASE NUMBER: 69576**

**Ident. Number 97-7604**

**Date Received: 9/6/2021**

**Receipt No: T110919**

**1. Name of Claimant(s):**

| Name             | Address            | City         | State | Country | Postal Code |
|------------------|--------------------|--------------|-------|---------|-------------|
| BRENDA BREWSTER  | 865 PENINSULA LOOP | PRIEST RIVER | ID    | USA     | 83856       |
| MICHAEL BREWSTER | 865 PENINSULA LOOP | PRIEST RIVER | ID    | USA     | 83856       |

**2. Date of Priority:**

| Date     | Explanation                                                |
|----------|------------------------------------------------------------|
| 1/1/2012 | Date is unknown. We were told the house was built in 2012. |

**3. Source:**

| Source       | Tributary |
|--------------|-----------|
| GROUND WATER |           |

**4. Point of Diversion:**

| Township | Range | Section | Gov Lot | QQ | Q  | County | Type |
|----------|-------|---------|---------|----|----|--------|------|
| 57N      | 04W   | 30      |         | SE | SE | BONNER |      |

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

| Water Use  | Number Of Homes | Stock       | Description                                                                      |
|------------|-----------------|-------------|----------------------------------------------------------------------------------|
| STOCKWATER |                 | Mixed Stock | Multiple types of animals and varied amounts on our homestead at any given time. |
| IRRIGATION |                 |             | Irrigation of lawn and food gardens                                              |
| DOMESTIC   | 1               |             | Single family home                                                               |

**6. Season(s) of Use:**

| Water Use  | From Month/Day | To Month/Day |
|------------|----------------|--------------|
| STOCKWATER | 01/01          | 12/31        |
| IRRIGATION | 4/1            | 10/31        |
| DOMESTIC   | 01/01          | 12/31        |

**7. Quantity:**

| Water Use  | CFS  | AF | KW |
|------------|------|----|----|
| STOCKWATER | 0.03 |    |    |
| IRRIGATION | 0.03 |    |    |
| DOMESTIC   | 0.03 |    |    |

**Totals**

| CFS  | AF | KW |
|------|----|----|
| 0.03 |    |    |

**8. Place of Use:**

| Water Use  | Total Claimed Acreage |
|------------|-----------------------|
| IRRIGATION | 2.00                  |

STOCKWATER

| Township          | Range | Section | QQ | Q  | County | Govt Lot | Acres |
|-------------------|-------|---------|----|----|--------|----------|-------|
| 57N               | 04W   | 30      | SW | SE | BONNER |          |       |
| 57N               | 04W   | 30      | SE | SE | BONNER |          |       |
| <b>IRRIGATION</b> |       |         |    |    |        |          |       |
| Township          | Range | Section | QQ | Q  | County | Govt Lot | Acres |
| 57N               | 04W   | 30      | SW | SE | BONNER |          | 1.00  |
| 57N               | 04W   | 30      | SE | SE | BONNER |          | 1.00  |
| <b>DOMESTIC</b>   |       |         |    |    |        |          |       |
| Township          | Range | Section | QQ | Q  | County | Govt Lot | Acres |
| 57N               | 04W   | 30      | SW | SE | BONNER |          |       |
| 57N               | 04W   | 30      | SE | SE | BONNER |          |       |



9. **Basis:**

| 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 Clark Fork-Pend Oreille River Basin Water System 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

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