

JAN 14 2022

DEPARTMENT OF
WATER RESOURCES

Form No. 42-1409-2 (Internet 7/17)

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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Claim ID: 79-14292

Date Received:

Receipt No:

Claim Fee: By:

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

Please type or print clearly

- Name of claimant(s) Benjamin S. Lindsey and Annette Lindsey Phone (208) 839-9965
Mailing address P.O. Box 223 7 White Bird Idaho Zip 83554
Street or Box City State
Email address (optional) None
- Date of priority: (Only one per claim) February 10, 2007 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 28 N, Range 2 E, Section 32 NE,
NE 1/4 of NE 1/4, or Govt. Lot _____ BM, County of Idaho;
Parcel no. RP28N02E320025A
Additional points of diversion, if any: _____
If available, GPS coordinates: _____
- Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.
New well - Air Rotary - 6" Casing From 2-18 Gauge 250 - Steel 4.5-10-550
Gauge - 160 PVC 15 gal/min 550 feet deep
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For domestic purposes from 01/01 to 12/31 amount 0.04 cfs (X) or AFY ()
Month/Day Month/Day
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.04 cfs (X) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic - One home

9. Location of place of use is: Township 28 N, Range 2 E, Section 32,

NE 1/4 of NE 1/4, Govt. Lot _____ BM, Parcel no. RP28N02E320025A

If different than shown in Item 4

for (check one) Domestic (☒) Stock () Domestic and Stock ()

Additional places of use, if any _____

10. In which county(ies) are lands listed above as place of use located? Idaho

11. Do you own the property listed above as place of use? Yes (☒) No ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None (☒)

13. Remarks (include an explanation of the priority date selected):

February 10, 2007 was the day we moved into our home to use our new well.

14. Basis of claim (check one) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 79-14292

15. 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 Snake 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) B Scott Lindsey Date: Jan 11 2022

Annelle Lindsey Date: Jan 11, 2022

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

_____ of _____,

Agent's title (Please print)

Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. Notice of Appearance:

Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature Annelle Lindsey Date _____

Address PO Box 223 94360 Coeur d'Alene Rd. Lihill Bldg. Selkirk 83554

Name of claimant(s) _____ Claim ID _____