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JAN 18 2022

DEPARTMENT OF
WATER RESOURCES

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

Claim ID: 87-12348

Date Received: 1/18/2022

Receipt No:

Claim Fee: \$25.00 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) Wayne Schwenne Trust Phone (208) 285-1345
Mailing address 1420 Gray Eagle Rd Genesee ID 83832
Street or Box City State Zip
Email address (optional) mschwenne41551@gmail.com
- Date of priority: (Only one per claim) 1900 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (✓) (a) Springs
which is tributary to (b) Sinks
- Location of point of diversion is: Township 37N, Range 05W, Section 19,
SW 1/4 of SW 1/4, or Govt. Lot 4 BM, County of Nez Perce;
Parcel no. RP37N05W195400, RP37N06W249000
Additional points of diversion, if any: SWSW Lot 4 (second POD), 37N06W24 SESE (third POD)
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.
Each spring has a cistern that then feeds its own trough. See map for locations of springs and troughs.
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from 1/1 to 12/31 amount .04 cfs (✓) or AFY ()
For Stockwater purposes from 1/1 to 12/31 amount .07 cfs (✓) or AFY ()
- Total quantity claimed .11 cfs (✓) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
1 home, approximately 300 head of mixed stock/cattle.

9. Location of place of use is: Township 37N, Range 05W, Section 19,
SW 1/4 of SW 1/4, Govt. Lot 4 BM, Parcel no. RP37N05W195400, RP37N06W249000
If different than shown in Item 4

for (check one) **Domestic** () **Stock** () **Domestic and Stock** (✓)

Additional places of use, if any 37N06W24 SESE

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

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.

87-4175, and see beneficial use claim for the pond and spring instream stockwater or None ()

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

This is the approximate known date of when the original barn and original house was on the property.

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 _____

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 notices in the Palouse 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, and that I have signed the foregoing document in the space below as the

Trustee _____ of Wayne Schwenne Trust _____,

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 Robert David Schwenne Date 1/12/2022

Printed Name of Authorized Agent Robert David Schwenne

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 _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____

PRBA Claim 87-12348

Spring and Stock Trough Locations

