

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
RECEIVED**

CIVIL CASE NUMBER: 69576

Claim ID: 97-7332

Date Received: 2-18-22

Receipt No: N038445

Claim Fee: 2500 By: ja

FEB 18 2022

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

IDWR / NORTH

Please type or print clearly

- Name of claimant(s) Bartholomew Trust, Craig & LaVonne Bartholomew, trs Phone (509) 467-1387
Mailing address 10819 N. College Place Dr. Spokane WA Zip 99218
Street or Box City State
Email address (optional) maeb123@hotmail.com
- Date of priority: (Only one per claim) 6/1960, pump drawn 1994 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (✓) (a) Priest Lake
which is tributary to (b) Priest River drainage CCR 2/15/22
- Location of point of diversion is: Township 61N, Range 4W, Section 09,
S.E. 1/4 of N.E. 1/4, or Govt. Lot 28A BM, County of Bonner;
Parcel no. RP0008700028A0A
Additional points of diversion, if any: None
If available, GPS coordinates: N/A
- 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.
1 1/2 inch water intake line from the lake to a depth of about 5 feet from surface. 75 feet into water. 1/2 hp above ground pump, pumps water to cabin for domestic use, bathroom, kitchen.
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For DOMESTIC Cabin water purposes from Jan 1 to Dec 31 amount .04 1.2 cfs (✓) or AFY (✓)
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed .04 cfs (✓) or AFY (✓) 1.2
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic, one cabin 630 square feet, 1 bedroom, 1 bathroom.

9. Location of place of use is: Township 61N, Range 4W, Section 9,
S.E. 1/4 of N.E. 1/4, Govt. Lot 28A BM, Parcel no. RP0008700028A0A
If different than shown in Item 4

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

Additional places of use, if any Boating and swimming in lake off dock and pier

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

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.

Boating and swimming in lake off dock and pier or None (✓)

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

Property began usage in 1960 when purchased, plumbing system was installed based on historical documents enclosed in early ~1994.

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

Court _____ Decree Date 8/28/1992 Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number Permit # 97-07332

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 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: 2

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) Craig C Bartholomew Date: 2-14-2022
LaVonne A. Bartholomew Date: 2-14-2022
Co-trustee of BARTHOLOMEW TRUST

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 _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

March 16, 1993

C W BARTHOLOMEW
16507 NEWPORT HWY
MEAD WA 99021

3-24-93

clerk # 4264
50⁰⁰

*Paid at Coeur d'Alene
office*

PERMIT APPROVAL NOTICE

RE: PERMIT NO. 97-07332

Dear Permit Holder:

Enclosed is a copy of your approved application for permit. We direct your attention to the conditions of approval on the final page.

Enclosed is a form entitled "Instructions for Proof of Beneficial Use". Please read the instructions carefully since you must take further action to develop this permit. Also enclosed is a form entitled "Proof of Beneficial Use". If your project is already completed you should complete and submit this form immediately.

Sincerely,

Brenda L. Chapman

BRENDA L. CHAPMAN
Water Resource Agent

BLM:cz

Enclosures