

RECEIVED
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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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number: 86-12145
Date Received: 3/10/2022
Receipt No:
Claim Fee:
Received 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**

1. Name of Claimant(s)

CHARLOTTE HALVORSON
1290 AMERICAN RIDGE RD
KENDRICK ID 83537-9504

Phone: (208) 289-5602

AND/OR

DONALD HALVORSON
1290 AMERICAN RIDGE RD
KENDRICK ID 83537

Phone: (208) 289-5602

2. Date of Priority: 12/31/1917

3. Source:

UNNAMED STREAM
UNNAMED STREAM

Trib. to:

MIDDLE POTLATCH CREEK
MIDDLE POTLATCH CREEK

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
38N	03W	28	NW SE		LATAH	Beginning
38N	03W	28	NW SE		LATAH	Ending

5. Description of diverting works:

Instream stockwater.
Instream stockwater.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
STOCKWATER	01/01	12/31	0.02		

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

Instream stockwater.

9. Place of use:

STOCKWATER within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
38N	03W	28	NW		SE		

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:

Year built date per taxlot data shows the home built in 1917. Additional photo that came from the Moscow paper around 1917 shows the homestead.

13. Basis of Claim: Beneficial Use

14. 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: 1

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): Donald Halverson Date: 3/10/2022
Charlotte Halverson Date: 3/10/2022

SRBA CLAIM 86-12145





