

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

APR 11 2022

IDWR / NORTH

CIVIL CASE NUMBER: 69576

Claim ID: 97-7403

Date Received: 4-11-2022

Receipt No: N038850

Claim Fee: 53.00 By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

- Name of claimant(s) SYDNEY G SMITH Phone (208) 428-0036
Mailing address 7289 HWY 57 PRIEST RIVER, IDAHO Zip 83856
Street or Box City State
Email address (optional) SANDLS7885@GMAIL.COM
- Date of priority: (Only one per claim) 12/31/2000 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (✓) (a) PRIEST RIVER, WEST FORK AND SPRING
which is tributary to (b) PRIEST RIVER
- a. Location of point of diversion is: Township 57N, Range 05W, Section 23,
SW 1/4 of SW 1/4, Govt. Lot , BM, County of BONNER
Parcel no. RP57N05W234800A
Additional points of diversion, if any: THERE ARE TWO POINTS OF DIVERSION -THE WEST FORK OF PRIEST RIVER
If available, GPS Coordinates
b. If instream flow, beginning point of claimed instream flow is:
Township , Range , Section , 1/4 of 1/4,
Govt. Lot , BM, County of
Ending point is: Township , Range , Section , 1/4 of 1/4,
Govt. Lot , BM, County of
- Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, 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.
PIPE FROM WEST FORK PRIEST RIVER TO SMALL POND WHICH THEN FEEDS LARGER POND VIA
PUMPS

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD)

(cfs)

(acre-feet)

For WILDLIFE STORAGE purposes from 01/01 to 12/31 amount or 10

For RECREATION STORAGE purposes from 01/01 to 12/31 amount or 10

For DIVERSION TO STORAGE purposes from 01/1 to 12/31 amount 0.29 or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.29 (cfs) and/or (b) 10 (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) WILDLIFE STORAGE, RECREATION STORAGE, DIVERSION TO STORAGE

9. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

[illegible]

Parcel no(s). RP57N05W234800A Total number of acres irrigated

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

11. Do you own the property listed above as place of use? Yes (✓) No ()
If your 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):

[illegible]

Name of claimant(s) SYDNEY G SMITH Claim ID

Scale: 2 inches equals 1 mile

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 97-07403

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: _____

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) *Sydney G Smith* Date: 03/31/2022

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

Agent's title (Please print) of _____
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 on behalf of 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) SYDNEY G SMITH Claim ID _____