

**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**

CIVIL CASE NUMBER: 69576

Claim ID: 916-2244

Date Received: N039876 6-3-22

Receipt No: N039876

Claim Fee: 89500 By: JA

RECEIVED

JUN 03 2022

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

IDWR / NORTH

Please type or print clearly

1. Name of claimant(s) Colburn Water Association Phone (208) 610-8505
Mailing address PO Box 1067 Sandpoint ID Zip 83864
Street or Box City State
Email address (optional) _____
2. Date of priority: (Only one per claim) September/8/1955 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water () or Other (☒) (a) Berry Creek
which is tributary to (b) Pack River
4. a. Location of point of diversion is: Township 59N, Range 02W, Section 35,
NW 1/4 of SE 1/4, Govt. Lot _____, BM, County of Bonner
Parcel no. RP59N02W358300A
Additional points of diversion, if any: _____
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 _____
5. 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.
35' wide and 4' high concrete dam that backs water up to an overflow from which water flows by gravity to the
treatment plant.

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD) (cfs) (acre-feet)

For Municipal purposes from 1/1 to 12/31 amount 0.45 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.45 (cfs) and/or (b) _____ (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) 137 households and 6 commercial services.

9. Description of place of use:

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

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

Parcel no(s). Large POU - See attached table for PLS use area. 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.
96-7607 0.25 cfs for municipal use. or None ()

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

~~Priority date is from Water Right Report obtained from IDWR website.~~

PLSS description of place of use is on attached table.

For pdf version of maps send an email to jeff.cowley@usa.com

Name of claimant(s) Colburn Water Association Claim ID _____

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 96-7607

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: 4

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

President of Colburn Water Assn
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 Todd Russell Date 5-12-22

Printed Name of Authorized Agent Todd Russell

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.

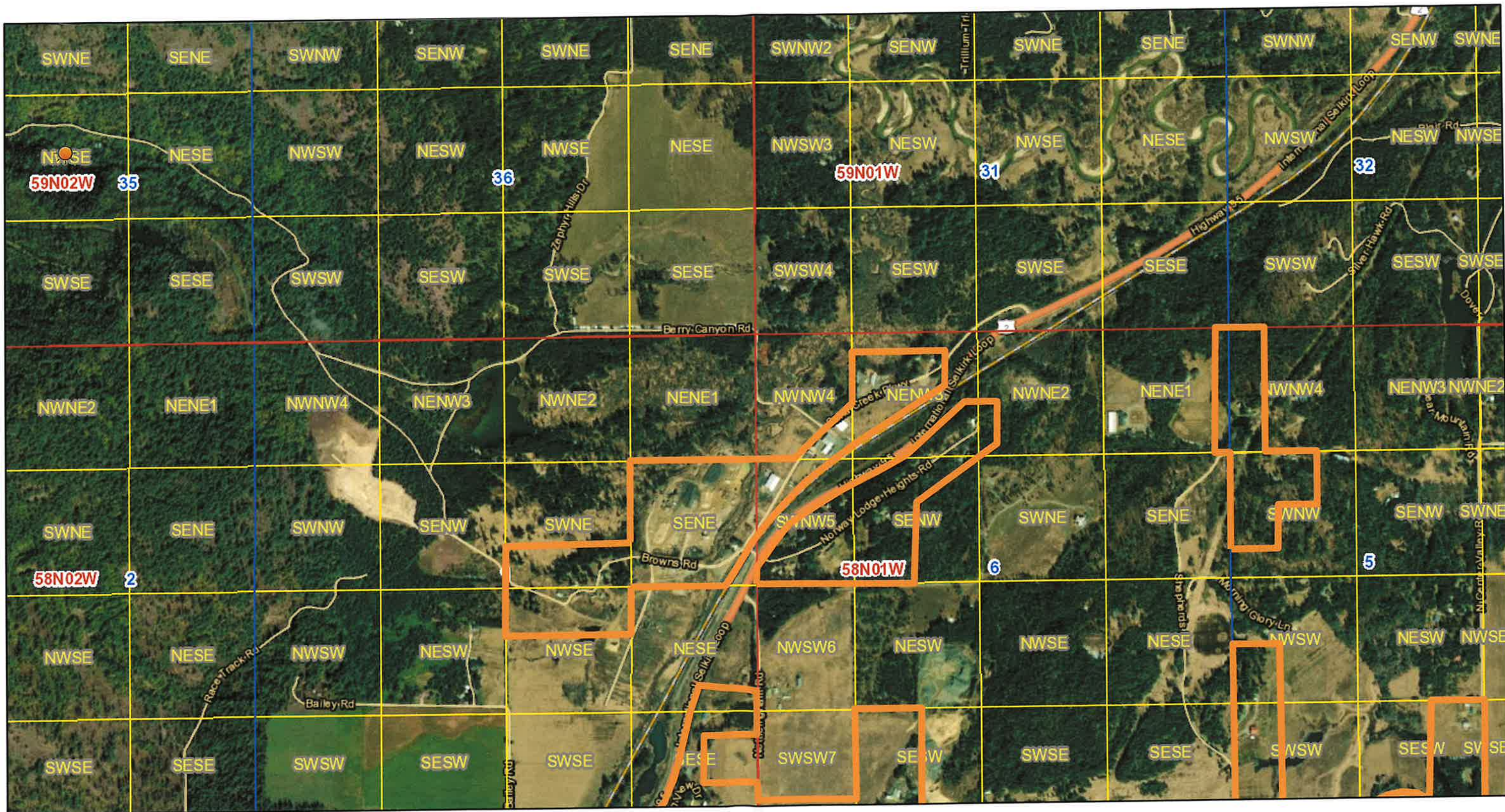
Signature _____ Date _____

Address _____

Name of claimant(s) Colburn Water Association

Claim ID _____

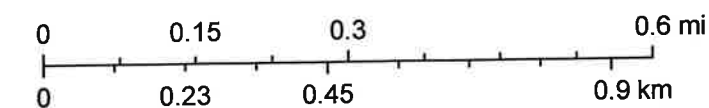
TWP	RGE	SEC	NE				NW				SW				SE			
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE
58N	01W	5						M	M			M	M	M				
58N	01W	6	M	M			M	M	M	M		M	M	M			M	M
58N	01W	7	M	M			M	M					M	M			M	M
58N	01W	8		M			M	M		M	M		M	M			M	M
58N	01W	9											M					
58N	01W	16						M	M									
58N	01W	17					M	M	M	M		M	M	M			M	M
58N	01W	18	M			M	M	M							M			
58N	01W	20	M	M			M											
58N	02W	1			M	M									M	M		M
58N	02W	12	M	M	M						M			M		M	M	M
58N	02W	13		M			M			M	M							



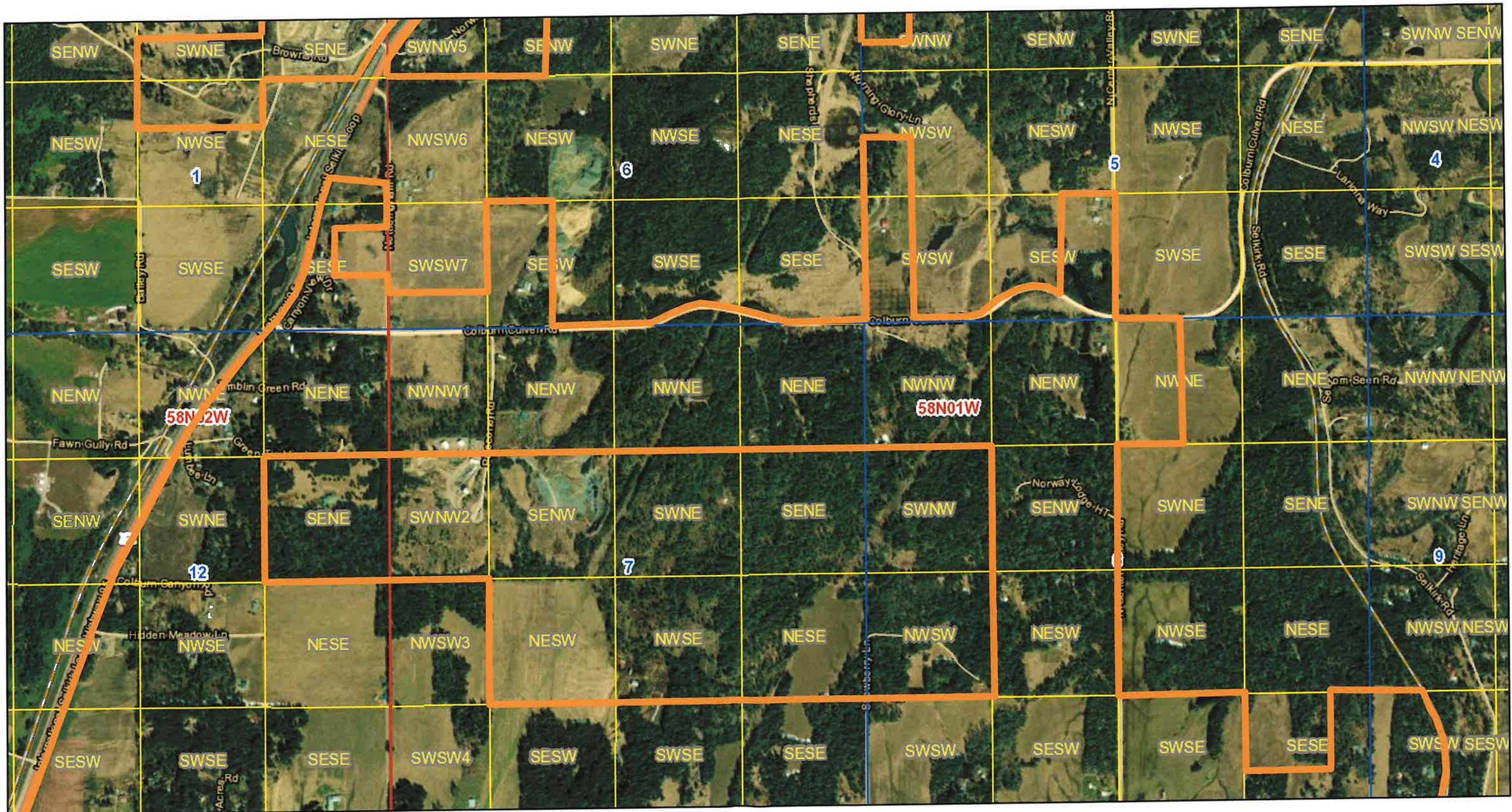
4/1/2022, 12:50:29 PM

- Override 1
- Counties
- Township/Range
- Override 1
- Quarter Quarter
- Idaho Outline
- Section
- Idaho Mask

1:18,056



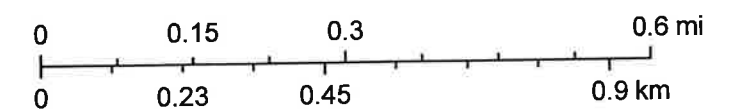
Source: Esri, Maxar, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community, Esri, HERE, Garmin, (c) OpenStreetMap contributors, Created by NRCS from 1:24,000 scale USGS topographic maps., Idaho Department of Water Resources



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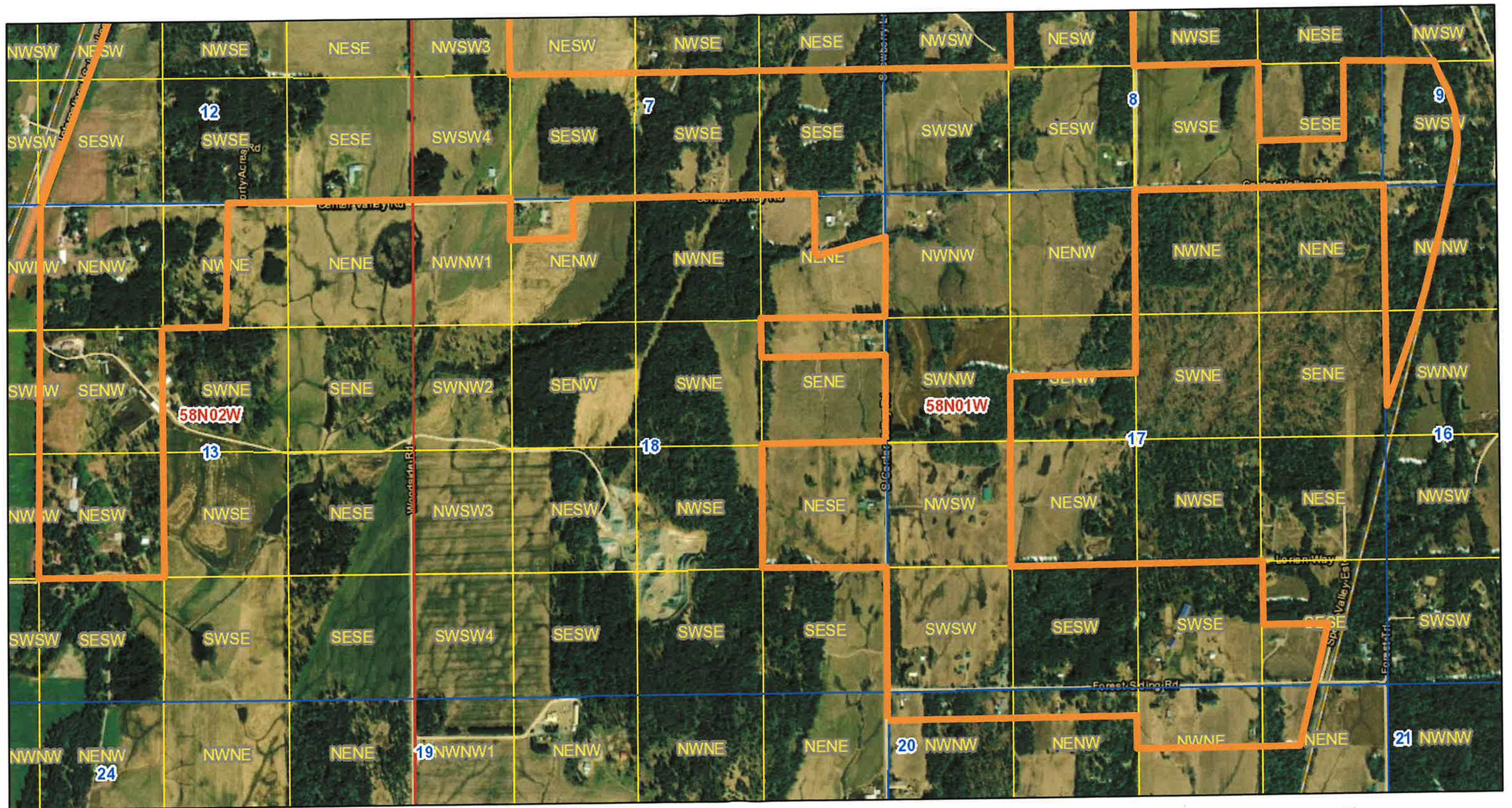
- Override 1
- Section
- Idaho Mask
- Counties
- Township/Range
- Quarter Quarter
- Idaho Outline

1:18,056



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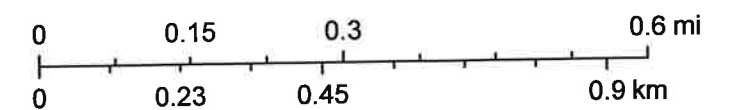
Column 3



4/1/2022, 12:54:35 PM

 Override 1  Section  Idaho Mask
 Counties  Township/Range
 Quarter Quarter  Idaho Outline

1:18,056



Source: Esri, Maxar, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community, Esri, HERE, Garmin, (c) OpenStreetMap contributors, Created by NRCS from 1:24,000 scale USGS topographic maps., Idaho Department of Water Resources