

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: 97-7055

Date Received: 6/27/22

Receipt No: N040277

Claim Fee: \$2500 By: SC

RECEIVED

JUN 27 2022

DWR / NORTH

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

1. Name of claimant(s) Shan C. Peterson Phone (415) 271-1279
Mailing address Po Box 1612 Paso Robles CA Zip 93447
Street or Box City State
Email address (optional) _____
2. Date of priority: May 13, 1974 5/13/1974 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water () or Other ☒ (a) unnamed spring
which is tributary to (b) sinks into ground (water right #: 97-7055)
4. Location of point of diversion is: Township 58N, Range 04W, Section 17,
SW 1/4 of SE 1/4, or Govt. Lot BM, County of Bonner;
Parcel no. RP58N04W178400A
Additional points of diversion, if any: _____
If available, GPS coordinates: _____
5. 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
97-7055: Pumping from spring box; pipe delivery to house.
6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For domestic purposes from Jan 1 Month/Day to Dec 31 Month/Day amount 0.04 cfs ☒ or AFY ()
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed 0.04 cfs ☒ or AFY ()
8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic for one (1) house.
x 1sp

9. Location of place of use is: Township 58N, Range 04W, Section 17,
SW 1/4 of SE 1/4, Govt. Lot BM, Parcel no. 758 Bonner SAME as Item 4
If different than shown in Item 4

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

Additional places of use, if any (none).

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 (X) 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.
97-70562 Cottonwood Creek (tributary to Priest Lake) or None ()
(other right)

13. Remarks (include an explanation of the priority date selected):
Per existing water rights license.

14. Basis of claim (check one) **Beneficial Use** () **Posted Notice** () **License** (X) **Permit** () **Decree** ()
Court Decree Date 5/13/74 (May 13, 1974) Plaintiff v. Defendant
If applicable provide IDWR Water Right Number 97-7055

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 (X) do not () wish to receive and pay a small annual fee for monthly copies of the docket sheet.
Number of attachments: NONE

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) Shirley Peterson Date: 6/15/22

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 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 _____