

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

RECEIVED

OCT 06 2022

IDWR / NORTH

Ident. Number: 96-9735
Date Received: 10/5/2022
Receipt No: N041368
Claim Fee: \$25.00
Received By: JB

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)

STEVEN J WRIGHT
PO BOX 3011
HAYDEN ID 83835-3011

Phone: (208) 929-0113

AND/OR

CINDY L WRIGHT
PO BOX 3011
HAYDEN ID 83835-3011

Phone: (208) 929-0113

2. Date of Priority: 1/30/2019

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
57N	03W	26	SE SE	1	BONNER	

5. Description of diverting works:

DRILLED WELL TO BE COMPLETED AT 494 SNUG HARBOR FOR DOMESTIC USE.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.04		0.6

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 0.6 A.F.A.

8. Non-irrigation uses:

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	03W	26	SE		SE	1	

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:

PRIORITY DATE BASED ON LICENSE

This right does not grant any right-of-way or easement across the land of another.

Domestic use is for 1 home. Irrigation of lawn, garden and landscaping associated with the home is authorized under separate right 96-9734.

13. Basis of Claim: License

14. Signature(s)

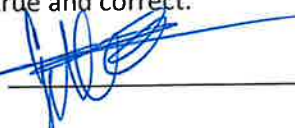
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the CLARK FORK-PEND OREILLE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

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):



Date:

10/6/22

Date: