

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

Ident. Number: 96-9771

Date Received: **NOV 26 2015**

Receipt No:

Claim Fee:

Received By: _____

RECEIVED

MAR 13 2022

IDWR / 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

1. Name of Claimant(s)

HILL FAMILY TRUST
835 S PASEO DE LA LIRA
GREEN VALLEY AZ 85614-4772

Phone: (520) 269-2829

2. Date of Priority: 8/29/2019

3. Source:

LAKE PEND OREILLE

Trib. to:

PEND OREILLE RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	01W	21	NE SE	2	BONNER	

5. Description of diverting works:

SUBMERSIBLE 1/2 HP PUMP (910GS05412CL), LAKE PUMP GFCI SYSTEM, ONE INCH RUBBER PIPE IN FOUR INCH CONDUIT PIPE APPROXIMATELY 120 FEET ON BOTTOM OF LAKE.

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		1.2

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 1.2 A.F.A.

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	01W	21	NE		SE	2	

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:

Place of use is located within Lot 10, and Lot 11A Replat, Garfield Bay No. 1 subdivision.

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 ____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

TRUSTEE(S) of Hill Family Trust
Agents 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 Bernice Hill, Trustee Date 3/2/23

Printed Name of Authorized Agent JOHN R. M. Hill, Trustee
BERNICE Hill, Trustee