

Spring

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

FEB 08 2023

IDWR / NOF

Ident. Number: 96-9816
Date Received: 10/13/2022 2/8/23
Receipt No: N042461
Claim Fee: \$25.00
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

JIM SCHAPER
PO BOX 216
LACLEDE ID 83841

Jim & Marlane Schaper Living Trust MS

Phone: (208) 263-6800

AND/OR

MARLANE SCHAPER
PO BOX 216
LACLEDE ID 83841

Phone: (208) 263-6800

2. Date of Priority: 5/23/2018

3. Source: SPRING SINKS

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	04W	12	NW SE NE		BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.01		0.7

7. Total Quantity Appropriated is:

0.01 C.F.S. and/or 0.7 A.F.A.

8. Non-irrigation uses:

9. Place of use:

STOCKWATER within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	04W	12	NE		NE		
56N	04W	12	SE		NE		

10. Do you own the property listed above as place of use? *No* *Yes* *MS*
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:

Rights 96-9700, 96-9701, and 96-9816 when combined shall not exceed a total annual diversion volume of 0.7 af from stockwater use.

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

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 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): Jim & Marlane living Trust Date: 1-29-2023

Marlane Schaper trustee Date: 1-29-2023