

DISTRICT COURT - CSRBA
Fifth Judicial District
County of Twin Falls - State of Idaho

RECEIVED
APR 24 2023
DEPARTMENT OF
WATER RESOURCES

By _____
CIVIL CASE NUMBER: 49576
Clerk
Deputy Clerk

Stamp: JAN 30 2023

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 COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM

Ident. Number: 95-18401
Date Received: 1/20/2023
Receipt No: C116024
Claim Fee: \$25.00
Received By: ku

**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)

STERLING & MARILYNN SNYDER FAMILY TRUST
PO BOX 112
ATHOL ID 83801

Phone: (208) 683-3529

2. Date of Priority: 10/13/1994

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
53N	03W	35	SW SW		KOOTENAI	

5. Description of diverting works:

WELL WITH PUMP TO HOME

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		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR TWO HOMES

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
53N	03W	35	NE		SW		
53N	03W	35	NW		SW		
53N	03W	35	SW		SW		
53N	03W	35	SE		SW		

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:

YEAR WELL WAS CONSTRUCTED AND PUT INTO SERVICE

13. Basis of Claim: Beneficial Use

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 COEUR D'ALENE-SPOKANE 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: 1

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 of Sterling & Marilyn Snyder 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 Marilynn A. Snyder Date 1/20/23
Printed Name of Authorized Agent Marilynn A. Snyder

Inspected by TDK
 Use Typewriter
 Typ 53N Pgs 3W Pgs 35
 Ball Point Pen
1/4 SW 1/4 SW 1/4

FORWARD WHITE COPY TO WATER RESOURCES

RECEIVED

JAN 30 2023

DEPARTMENT OF
WATER RESOURCES

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re CSRBA

Case No. 49576

Subcase

95-18401

(Insert water right number)

STANDARD FORM 4

MOTION TO FILE A LATE NOTICE OF
CLAIM

INSTRUCTIONS

This form is used to file a late Notice of Claim in a reporting area where the Director's Report has been filed. Forms may be obtained from the CSRBA Court, the Idaho Department of Water Resources (IDWR), or you may copy or reproduce this blank form.

The water right number for your late Notice of Claim must be indicated above in the blank space following "Subcase." To obtain your water right number, contact the Idaho Department of Water Resources. You must use a **separate form for each** late Notice of Claim.

By filing a Motion to File a Late Notice Claim, you certify that it is well-grounded in fact; is warranted by existing law or a good-faith argument for the extension, modification or reversal of existing law; and is not filed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation.

☐ I have read **CSRBA Administrative Order 1**, Rules of Procedure.

My name is Marilynn A. Snyder

My address is PO Box 112
24562 McCoy Rd. Attn: ID. 83801

My phone number is: work _____ Home 208-683-3529

☐ I am an attorney representing _____

My name is _____

My address is _____

My phone number is _____

☒ I did not file a Notice of Claim to the use of water in the CSRBA because:

At the time the notice was received my husband
was in charge of all ranch business. We did not realize he
was suffering from a brain tumor and as a result many
business affairs were neglected.

☐ I filed a Notice of Claim and elected to defer judicial proceedings on my domestic or stock watering use. I desire to reinstate my Notice of Claim for domestic or stock watering use.

☐ I am providing legal and factual documentation for my claimed use of water. You must describe these documents and attach a readable copy. (You do not need to fill this out if you are reinstating a Notice of Claim for domestic or stock watering use, but you must attach a copy of your Notice of Claim.)

A Motion to File Late Notice of Claim will require a hearing before the Presiding Judge.

Follow these instructions regarding the hearing on the motion.

1. Contact the Clerk of the CSRBA Court at (208) 736-3011 to request a hearing date and time.
2. Fill in the following information:

This motion will be heard on 04/18/23 1:30 PM PT
(insert date and time)
at the CSRBA Courthouse, 253 Third Avenue North, Twin Falls, Idaho.

I have attached:

- ☒ A fully completed Notice of Claim (available from IDWR).
- ☒ A claim filing fee for a domestic and stock watering use. IDWR may charge this fee pursuant to I.C. §42-1414. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ 25.00.
- ☐ A claim filing fee and a late claim fee for those claims other than domestic or stock watering use for which a notice of claim was not filed. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ _____.

Marilyn A. Snyder, Trustee
(Signature of person filing motion)

(Attorney signing in representative capacity)

INSTRUCTIONS FOR MAILING

You must mail the Motion, to the Clerk of the court. **FAX filings will not be accepted.**
You must also send a copy to all the parties listed below in the Certificate of Mailing.

CERTIFICATE OF MAILING

I certify that on 1/23, 2023, I mailed the original and copies of this Motion, including all attachments, to the following persons:

1. Original to:

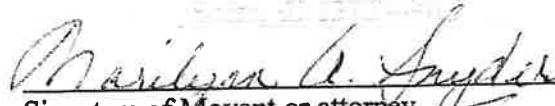
Clerk of the District Court
Coeur d'Alene-Spokane River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

2. Copies to:

IDWR Document Depository
PO Box 83720
Boise, ID 83720-0098

United States Department of Justice
Environment & Nat'l Resources Div
550 W Fort Street, MSC-033
Boise, ID 83724

Chief, Natural Resources Division
Office of Attorney General
State of Idaho
PO Box 83720
Boise, ID 83720-0010


Signature of Movant or attorney
mailing on Movant's behalf *Trustee*



STERLING & MARILYNN SNYDER FMLY TRUST
PO BOX 112 208-683-3529
ATHOL, ID 83801

1373
93-168/929

1/23/23

Date CHECK ARMOR

Pay to the
Order of

State of Idaho Dept. of Water Resources \$ 25.00
Twenty-five and no 100 Dollars PHOTO
SAFE DEPOSIT
DISK NO. 100



First Interstate Bank
855-342-3400
firstinterstate.com

For

Marilyn A. Snyder

⑆09 290 1683⑆ 30000 14344⑈ 1373

Halstead Clarke

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IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
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3. Trib. to:
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0.04 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

DOMESTIC USE FOR TWO HOMES

95-18401

SCANNED
JAN 31 2023

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
53N	03W	35	NE		SW		
53N	03W	35	NW		SW		
53N	03W	35	SW		SW		
53N	03W	35	SE		SW		

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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 of Sterling & Marilyn Snyder 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 Marilynn A. Snyder Date 1/20/23
Printed Name of Authorized Agent Marilynn A. Snyder

inspected by TDK
 Typ 53N Pgs 3W Pgs 35
 Ball Point Pen
14 SW 14 SW 14

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

Idaho Department of Water Resources Receipt

Receipt ID: C116026

Payment Amount	\$25.00	Date Received	4/24/2023	Region	STATE
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Payment Type	Check	Check Number	1373
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Payer STERLING & MARILYN SNYDER FMLY TRUST

Comments NOTICE OF CLAIM TO A WATER RIGHT
 CIVIL CASE NUMBER #49576
 FOR: STERLING & MARILYNN SNYDER FAMILY TRUST
 WR CLAIM OR PARCEL # 95-18401
 FOR: CSRBA
 THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$25.00	NORTHERN ID ADJUDICATION FILING FEE	75503	0337	1		1155



Signature Line (Department Representative)