

FEB 21 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

RECEIVED

MAY 22 2023

DEPARTMENT OF
WATER RESOURCES

By _____ Clerk
CIVIL CASE NUMBER: 49576 Deputy Clerk

Ident. Number: 95-18289
Date Received: 5.22.23
Receipt No: C116321
Claim Fee: 25.00
Received By: [Signature]

**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)

CHRISTOPHER W PHILLIPS
1568 CIDER RD
ATHOL ID 83801

Phone: (208) 691-7018

AND/OR

CORRIS G PHILLIPS
1568 CIDER RD
ATHOL ID 83801

Phone: (208) 691-7111

2. Date of Priority: 12/17/1998

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
54N	03W	28	SE NE		BONNER	

5. Description of diverting works:

WELL, PUMP AND PIPELINE

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:

ONE HOME W/LAWN

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
54N	03W	28	SE		NE		

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:

SPRING ALSO USED FOR DOMESTIC

12. Remarks:

Priority Date Explanation:

When farm house was first hooked up to the WELL.

USE NOT TO EXCEED 13,000 GALLONS PER DAY WHEN COMBINED WITH 95-18290, 95-18291, & 95-18292

13. Basis of Claim: Beneficial Use

14. Signature(s)

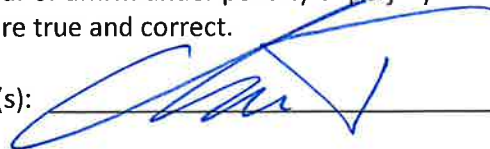
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do ____ do not ____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

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: 12.7.2022

Date: _____

Page 2 of 11 2023

My name is Christopher William Phillips

My address is 1568 Cider Rd, Athol ID
83801

My phone number is: work _____ Home 208-691-7018

☐ 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:

Health emergencies took priorities
away from getting this done.

☐ 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 April 18, 2023 ^{1:30pm}
(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.
- ☐ 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 \$ _____.


(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 Feb 16, 2023, I mailed the original and copies of this Motion, including all attachments, to the following persons:

1. Original to:

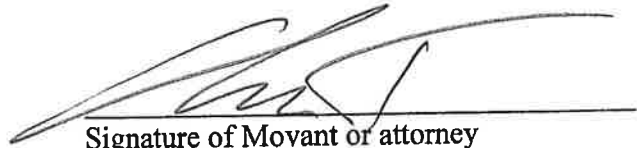
Clerk of the District Court
Coeur d'Alene-Spokane River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

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

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IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
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95-18289

SCANNED

FEB 21 2023

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ONE HOME W/LAWN

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DOMESTIC within BONNER County

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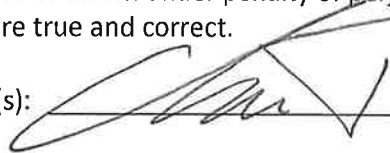
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For Individuals:

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Signature of Claimant(s):



Date: 12.17.2022

Date: _____

Idaho Department of Water Resources Receipt

Receipt ID: C116321

Payment Amount	\$25.00	Date Received	5/22/2023	Region	STATE
Payment Type	Check	Check Number	145		
Payer	CIDER MOUNTAIN INC				

Comments NOTICE OF CLAIM TO A WATER RIGHT
CIVIL CASE NUMBER #49576
FOR: CHRISTOPHER W PHILLIPS AND/OR CORRIS G PHILLIPS
WR CLAIM OR PARCEL # 95-18289
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)