

AUG 18 2023
DEPARTMENT OF
WATER RESOURCES

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

MAR 22 2023

Form No. 42-1409-2 (Internet 5/17)

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

CIVIL CASE NUMBER: 49576

Claim ID: 45-18436

Date Received: 8-18-23

Receipt No: C116914

Claim Fee: 25.00 By: Ku

Clerk
Deputy Clerk

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

Please type or print clearly

1. Name of claimant(s) Timothy and Candis Bayes Phone (208) 602-1521

Mailing address 14 Hazel Meadow Rd City _____ State _____ Zip _____
Street or Box

Email address (optional) _____

2. Date of priority: (Only one per claim) 10-23-2020 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____

4. Location of point of diversion is: Township 54N, Range 05W, Section 30,
NW 1/4 of SW 1/4, or Govt. Lot 3 BM, County of Banner;
Parcel no. RP54N05W305552A

Additional points of diversion, if any: _____

If available, GPS coordinates: _____

5. Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

well with Pump and pipe to place of use

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For Domestic purposes from 1-1 to 12-31 amount 0.04 cfs ☒ or AFY ()
Month/Day Month/Day

For stock water purposes from 1-1 to 12-31 amount 0.02 cfs ☒ or AFY ()

7. Total quantity claimed 0.05 cfs ☒ or AFY ()

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)

1 home / stock 5 houses 5 cows

9. Location of place of use is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM, Parcel no. Same

for (check one) Domestic ☒ Stock ☒ Domestic and Stock ☒ If different than shown in Item 4

Additional places of use, if any Bonner County

10. In which county(ies) are lands listed above as place of use located? Bonner County

11. Do you own the property listed above as place of use? Yes ☒ No ☐

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ☒

13. Remarks (include an explanation of the priority date selected):

Date well completed - well driller report

14. Basis of claim (check one) Beneficial Use ☒ Posted Notice ☐ License ☐ Permit ☐ Decree ☐

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 95-18436

15. **Signature(s)**

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Water System 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) [Signature] Date: 3-16-2023

[Signature] Date: March 16, 23

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

_____ of _____
Agent's 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 _____ Date _____

Printed Name of Authorized Agent _____

16. **Notice of Appearance:**

Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____

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 march 20th, 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

RECEIVED
MAR 22 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

Subcase 95-18436
(Insert water right number)

Case No. 49576

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 Timothy Bayes

My address is 19 Hazel meadow Rd
Blanchard ID 83804

My phone number is: work 208-607-1521 Home Same

☐ 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:

I was not aware of needing to make a
claim and property was under construction

☐ 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 June 20th at 1:30 P.M.
(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 \$ _____.

Tina R.
(Signature of person filing motion)

(Attorney signing in representative capacity)