

**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 KOOTENAI RIVER BASIN WATER
SYSTEM

CIVIL CASE NUMBER: 89576

Ident. Number: 98-2051
Date Received: 9/24/2026
Receipt No:
Claim Fee: \$25.00
Received By: NOV 6/26

RECEIVED

SEP 24 2026

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)

COWLEY LIVING TRUST
618 TURKEY HOLLOW RD
BONNERS FERRY ID 83805

Phone: (208) 267-2772

2. Date of Priority: 7/27/1936

3. Source:
COW CREEK

Trib. to:
KOOTENAI RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
62N	02E	31	SE SW		BOUNDARY	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	1/01	12/31	0.04		1.2
STOCKWATER	1/01	12/31	0.02		0.4

7. Total Quantity Appropriated is:

0.06 C.F.S. and/or 1.6 A.F.A.

8. Non-irrigation uses:

30 HEAD OF MIXED STOCK
DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BOUNDARY County

Township	Range	Section	¼	of	¼	Lot	Acres
62N	02E	31	SE		SW		

STOCKWATER within BOUNDARY County

Township	Range	Section	¼	of	¼	Lot	Acres
62N	02E	31	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:

13. Basis of Claim: Decreed

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 KOOTNENAI 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: _____

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 Cowley Living 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 Virginia Cowley Date 9-24-26

Printed Name of Authorized Agent Virginia Cowley