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

NOV - 2 2026

By _____ Clerk
Deputy Clerk

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

Ident. Number: 91-7030
Date Received:
Receipt No:
Claim Fee:
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

ROGER HENDERSHOT
220 ABBEY RD
SAINT MARIES ID 83861

Phone: (971) 719-3778

2. Date of Priority: ~~9/23/2026~~ JUNE 15, 1977

3. Source:
~~GROUND WATER~~ **UNNAMED STREAM**

Trib. to:
HELLS GULCH CREEK

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼		Lot	County	Type
47N	02W	34	SW	SE		BENEWAH	

5. Description of diverting works:

5' X 25', 220 ELEC SUB PUMP, PIPE 1"

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		
~~STOCKWATER~~	~~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:

1 HOME

9. Place of use:

DOMESTIC within BENEWAH County

Township	Range	Section	¼	of	¼	Lot	Acres
47N	02W	34	SW		SE		

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:
I AM THE PURCHASER OF PROPERTY, OWNER HAS GIVEN PERMISSION TO MODIFY PROPERTY.

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 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: 10-19-24

_____ Date: _____