

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

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, MAY 20 2025  
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

By \_\_\_\_\_  
CIVIL CASE NUMBER: 49576  
Clerk  
Deputy Clerk

Ident. Number: 95-18678  
Date Received:  
Receipt No:  
Claim Fee: \$25.00  
Received By: \_\_\_\_\_

**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)

PAMELA J WILLIAMS  
25024 N DERTING RD  
HAYDEN ID 83835-7888

Phone: (509) 733-1441

2. Date of Priority: 12/31/1932

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
52N	03W	9	NE NW		KOOTENAI	

5. Description of diverting works:

HAND DUG WELL ON ADJACENT PARCEL (52N03W092650), GRAVITY FED PIPE TO POU

6. Water is used for the following purposes:

Purpose	From	To	C.F.S. (or)	A.F.A.
DOMESTIC	01/01	12/31	0.02	

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC (ONE HOME) AND STOCKWATER (11 MULES)

SCANNED

MAY 30 2025

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
52N	03W	9	NE		NW		

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:

95-12328

12. Remarks:

Priority Date Explanation:

YEAR BUILT PER KOOTENAI COUNTY RECORDS (1932)

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: 0

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): Pamela J. Williams Date: 5-16-2025

\_\_\_\_\_  
Date: \_\_\_\_\_