

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF
TWIN FALLS

Ident. Number: 97-7387

Date Received: 9/8/2021

Received By:

**NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW**

1. Name of Claimant(s)

JOANNE RENKERT Phone:(208) 448-9978
713 WOODS RD
PRIEST RIVER ID 83856-8335

2. Date of Priority: 6/22/1998

3. Source: UNNAMED STREAM Tributary to: PEND OREILLE RIVER

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
56N	04W	21	SE SW		BONNER	

5. Description of diverting works:

6: Water is used for the following purposes:

<u>Purpose</u>	<u>From</u>	<u>To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
FIRE PROTECTION STORAGE	1 /1	12/31	0	4.8
RECREATION STORAGE	1 /1	12/31	0	4.8
WILDLIFE STORAGE	1 /1	12/31	0	4.8

7. Total Quantity Appropriated is: C.F.S. and/or 4.8 A.F.A

8. Non-irrigation uses:

9. Place of use:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
56N	04W	21	SE SW		FIRE PROTECTION STORAGE	
					Section Acres	

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
56N	04W	21	SE SW		RECREATION STORAGE	
					Section Acres	

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
56N	04W	21	SE SW		WILDLIFE STORAGE	
					Section Acres	

Total Acres

10. Place of use in counties: BONNER

11. Do you own the property listed above as place of use? Yes

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use: Water Use Description

FIRE PROTECTION STORAGE

RECREATION STORAGE

WILDLIFE STORAGE

14. Basis of Claim: License

15. Signature(s)

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____

_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

_____ of _____,
Title Organization

That I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date: _____

Title and Organization _____

Please print name