

From: [Thiel, Sandra](#)
To: CHRISREISENAUER@YAHOO.COM
Subject: Water Right Claim 97-7680
Date: Thursday, September 30, 2021 10:05:00 AM
Attachments: [ClaimFromPermit97-7680.pdf](#)

Good Morning,

Thank you for filing for your water right online. The program you chose was for an Application for Permit. I believe you are filing a claim in the Clark Fork-Pend Oreille River Basin Adjudication. I created the enclosed claim from the information you provided online. You will note the highlighted elements. The priority date filed online only included a year. Without a day and month we typically assign December 31. If that is incorrect you may amend the date when you submit the claim. Also, the attached claim form includes the typical domestic rate of 0.04 cubic feet per second.

You paid the \$100 fee for the Application for Permit. Notice of Claim fees are only \$25. I have also included a Request for Withdrawal form. We will apply the claim fee of \$25 and refund the remaining \$75. Please sign both documents, the Notice of Claim to a Water Right and the Request for Withdrawal form and mail them to me at the address below. We will need original signatures.

Please let me know if you have any questions.

Sandra Beer Thiel

322 E Front Street PO Box 83720
Boise ID 83720-0098
208.287.4881



IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098

Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Gary Spackman

September 30, 2021

REISENAUER FAMILY LP
3240 N. MOUNTAIN VIEW RD
MOSCOW ID 83843

RE: Clark Fork-Pend Oreille River Basin Adjudication claim 97-7680

Dear Sir/Madam:

Thank you for filing for your water right online. The program you chose was for an Application for Permit. I believe you are filing a claim in the Clark Fork-Pend Oreille River Basin Adjudication. I created the enclosed claim from the information you provided online. You will note the highlighted elements. The priority date filed online only included a year. Without a date and month we typically assign December 31. If that is incorrect you may amend the date when you submit the claim. Also, the attached claim form includes the typical domestic rate of 0.04 cubic feet per second.

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Sincerely,

Sandra Thiel
Sr. Water Resource Agent

Enclosures

**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 CLARK FORK-PEND OREILLE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 69576

Ident. Number: 97-7680
Date Received: 9/20/2021
Receipt No:
Claim Fee:
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)

REISENAUER FAMILY LP
3240 N. MOUNTAIN VIEW RD
MOSCOW ID 83843

Phone: (208) 892-3486

2. Date of Priority: 12/31/1971

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
59N	04W	3	NE SW		BONNER	

5. Description of diverting works:

1/3 Hp well. Electric motor. Home use only. No irrigation.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	1 /1	12/31	0.04		1.6

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

domestic use only. (drinking, shower, toilet, cleaning, etc.) No irrigation.

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
59N	04W	3	NE		SW	4	0.2

Total Acres = 0.2

10. Do you own the property listed above as place of use? No

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: 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 CLARK FORK-PEND OREILLE 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 Organizations:

I do solemnly swear or affirm under penalty of 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 _____

Idaho Department of Water Resources Receipt

Receipt ID: T110914

Payment Amount \$100.00 Date Received 9/14/2021 3:00 PM Region Electronically Transmitted

Payment Type Charge Card

Payer Christin S Reisenauer

Comments App Permit 97-7680(1056)ORDERID: 48539630
LOCAL REFID: KyOP/bQzXUCIk7w69PAnyA==
TOTAL PAID:\$100.00(FEEs: \$4.00)
AUTH_CODE: 04676D
REC DATE: 9/14/2021 03:00:29 PM MDT

DOCUMENT NUMBER: R220285

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$100.00	PERMITS	56103	0229	21		1155

Signature Line (Department Representative)

**REQUEST FOR WITHDRAWAL OF APPLICATION FOR PERMIT
WITH FILING FEES APPLIED TO NOTICE OF CLAIM**

Name of Applicant: Reisenauer Family LP

Mailing Address: 3240 N. Mountain View Rd; Moscow ID 83843

Amount: \$100

Receipt No.: T110914

Application No(s): 97-7680

I/We hereby withdraw our Application for Permit to Appropriate the Public Waters of the State of Idaho which number(s) appear above and for which I/We previously paid a filing fee to the Idaho Department of Water Resources. I request the filing fee I/We paid on the receipt referenced above be applied to filing a Notice of Claim to a Water Right.

For Individuals:

_____ (Signature of Applicant)	_____ (Date)
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_____ (Signature of Applicant)	_____ (Date)
-----------------------------------	-----------------

For Organizations:

_____ (Signature of Authorized Agent)	_____ (Date)
--	-----------------

(Title)

(Name of Organization)

Return to:	Idaho Dept. of Water Resources 7600 N. Mineral Dr. Suite 100 Coeur d'Alene, ID 83815	or	Idaho Dept. of Water Resources Adjudication Section P.O. Box 83720 Boise, ID 83720-0098
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For IDWR Use

	<u>Initials</u>	<u>Date</u>
Approval Region Approval	_____	_____
State Office Data Entry	_____	_____
Data Entry	_____	_____