

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: 96-7587
Date Received: 12-6-2021
Receipt No: N037936
Claim Fee: 25.00
Received By: dh

RECEIVED

DEC 06 2021

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

IDWR / NORTH

1. Name of Claimant(s)

~~ALICE M LUND~~

~~PO BOX 705~~

~~PRIEST RIVER ID 83856~~

William R. Zook
1620 Riverside Rd.
Priest River, ID.
83856

Phone:

847-869-2310

~~LLOYD L LUND~~

~~PO BOX 705~~

~~PRIEST RIVER ID 83856~~

Phone:

2. Date of Priority: 7/25/1977

3. Source:

UNNAMED STREAM

Trib. to:

LAKE PEND OREILLE

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	05W	27	NW SE	3	BONNER	

5. Description of diverting works: Collection Box, Pipe line, ~~and other 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

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 1.2 A.F.A.

8. Non-irrigation uses: home, lawn, garden

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	05W	27	NW		SE	3	

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: 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 CLARK FORK-PEND OREILLE 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 Individuals:

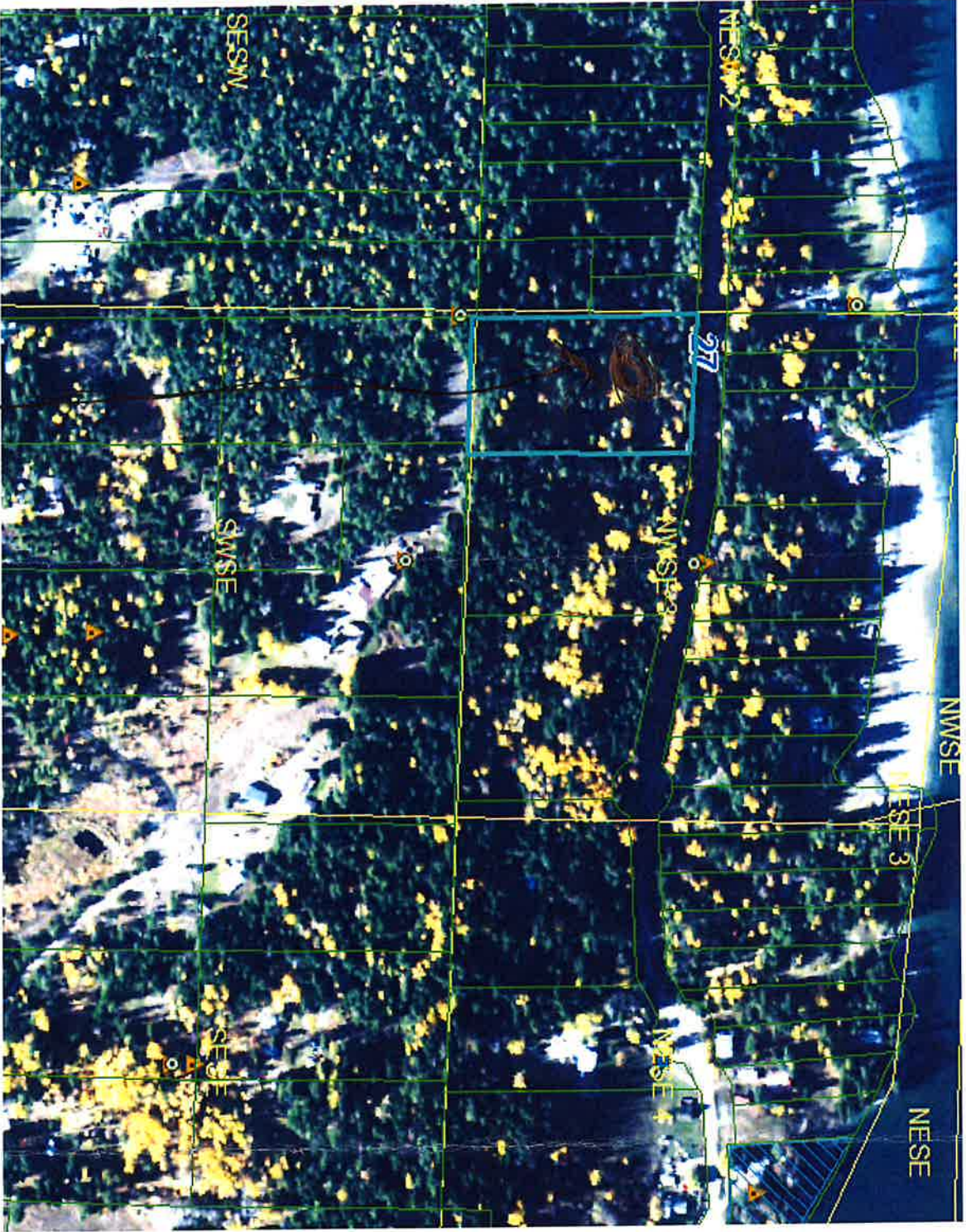
I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):

true and correct.

William R. Zook Date: 12/1/2021

Date: _____



Home location

N →

PIN: 56N0560278200A

W. Zook
96-7587