

**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: 96-4196
Date Received: 5/5/2022
Receipt No: ND39473
Claim Fee: \$25.00
Received By: _____

RECEIVED

MAY 05 2022

IDWR/NORTH

**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)

RON SUKUT
2931 HIERRO
SAN CLEMENTE CA 92673

Phone: (949) 275-4974

DIANE SUKUT
2931 HIERRO
SAN CLEMENTE CA 92673

Phone: (949) 275-4974

2. Date of Priority: 4/1/1962

3. Source:

FRY CREEK

Trib. to:

LAKE PEND OREILLE

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
56N	02W	2	SE NW		BONNER	

5. Description of diverting works:

Pump from Fry Creek to domestic system.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	1/01	12/31	0.02		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

Domestic use with lawn and garden irrigation. Can be used for emergency fire suppression.

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	02W	2	NE		NW	3	
56N	02W	2	SE		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:

Ground Water Right 96-11237

12. Remarks:

Priority Date Explanation:

Based on Statutory claim. Bonner county parcel data shows built date of 1960.

P/D IN BLK. 1, LOT 13, BIRCH BANK LOTS.

13. Basis of Claim: Statutory Claim

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 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:

5/5/22

Date: