

JUN 14 2022

DEPARTMENT OF
WATER RESOURCESIN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLSIN 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: 97-7140

Date Received:

Receipt No:

Claim Fee:

Received By:

~~\$62.00~~ 37.00

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

STATE OF IDAHO
DEPT OF TRANSPORTATION
DIVISION OF AERONAUTICS
PO BOX 7129
BOISE ID 83707

Phone: (208) 344-8832

2. Date of Priority: 12/6/1979 7/1/2022

3. Source: PRIEST LAKE Trib. to: PRIEST RIVER ~~PEND O REILLE RIVER~~

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
60N	04W	26	SW NW		BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	5/15	9/15	0.42		36

7. Total Quantity Appropriated is:

0.42 C.F.S. and/or 36 A.F.A.

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
60N	04W	26	SW		NW		1
60N	04W	26	SE		NW		1
60N	04W	26	NE		SW		2
60N	04W	26	NW		SW		4
60N	04W	26	SE		SW		3
60N	04W	35	NE		NW		1

Total Acres = 12

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:

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 Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

Right of Way Manager of Idaho Transportation Department
Agents Title (please print) Name of Organization (please print)

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

Signature of Authorized Agent Justin Pond Date 6/06/2022

Printed Name of Authorized Agent Justin Pond