

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

Claim ID: 97-9407

Date Received: 6-24-2022

Receipt No: NO40189

Claim Fee: \$25.00 By: HL

RECEIVED

JUN 24 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

Please type or print clearly

1. Name of claimant(s) Kathy Whitehouse, and/or see attachment Phone (208) 597-5642
 Mailing address 906 Coyote Trail Newport WA Zip 99156
Street or Box City State
 Email address (optional) _____
2. Date of priority: (Only one per claim) 1915 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water () or Other (✓) (a) Spring
 which is tributary to (b) Freeman Creek
4. Location of point of diversion is: Township 56N, Range 05W, Section 6,
SW 1/4 of NW 1/4, or Govt. Lot _____ BM, County of Bonner;
 Parcel no. RP56N06W010001A
 Additional points of diversion, if any: _____
 If available, GPS coordinates: _____
5. Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.
Spring box that feeds into the holding tank that supplies the cabin. The spring is located on Inland Empire Paper Co property that has historically fed the cabin. See map. GPS coordinates 48.232195, -117.021172.
6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

		Month/Day	Month/Day	cfs (✓) or AFY ()
For	Domestic	purposes from	<u>1/1</u> to <u>12/31</u>	amount <u>.04</u>
For	Stockwater	purposes from	<u>1/1</u> to <u>12/31</u>	amount <u>.02</u>
7. Total quantity claimed .06 cfs (✓) or AFY ()
8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
1 cabin, 1 shop

Name of Other Claimants:

And/or Wallace Mandigo, 126 SE 3rd, Collage Place WA 99324, (509) 301-0448

And/or Lonnie Mandigo, 2673 NW Rolling Green, Corvallis OR 97330

And/or Roseann Wood, 231 6710 Tronson Rd, Vernon BC Canada V1H1X6, (250) 306-6710

Written Statement for New Claim

6/10/2022

My name is Jerry Whitehouse and I am the grandson of David Mandigo. The cabin acknowledged on this claim was originally constructed in 1915 by the previous property owners. In 1945, my grandfather David Mandigo bought the property and continued using the cabin/spring. This property has been in the family ever since and continues the use as claimed.

Signed,

A handwritten signature in blue ink, appearing to read "Jerry Whitehouse". The signature is written in a cursive, flowing style.

Jerry Whitehouse

906 Coyote Trail, Newport WA 99156

(509) 589-1136

9. Location of place of use is: Township 56N, Range 05W, Section 6,
NW 1/4 of SW 1/4, Govt. Lot 9 BM, Parcel no. RP56N05W062401A
If different than shown in Item 4
for (check one) **Domestic** () **Stock** () **Domestic and Stock** (✓)

Additional places of use, if any _____

10. In which county(ies) are lands listed above as place of use located? Bonner

11. Do you own the property listed above as place of use? Yes (✓) No ()
If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
_____ or None (✓)

13. Remarks (include an explanation of the priority date selected):
This is when the cabin was originally built and began using the spring water. Our family purchased the property in 1945 and continued the use. This is one of the homes originally claimed in statutory claim 97-4026.

14. Basis of claim (check one) **Beneficial Use** (✓) **Posted Notice** () **License** () **Permit** () **Decree** ()
Court _____ Decree Date _____ Plaintiff v. Defendant _____
If applicable provide IDWR Water Right Number _____

15. **Signature(s)**
(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Clark Fork-Pend Oreille River Basin Water System 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) Wallace T. Moninger Date: 6-15-22

Date: _____

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

Agent's title (Please print) _____ of _____
Name of organization (Please print)
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____
Printed Name of Authorized Agent _____

16. **Notice of Appearance:**
Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____
Address _____

Name of claimant(s) _____ Claim ID _____

