

**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 97-8361

Date Received: 2/19/2022

Receipt No:

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DENNIS DOPPS	372 WEST BRANCH RD.	PRIEST RIVER	ID	USA	83856

2. Date of Priority:

Date	Explanation
4/1/1979	This is the year our well was drilled and usage was started.

3. Source:

Source	Tributary
GROUND WATER	

4. Point of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County	Type	Description
57N	05W	26		SE	SE	BONNER		Well for household use.

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Number of Stock	Description
DOMESTIC	1			Household, Domestic

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	01/01	12/31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.04		

Totals

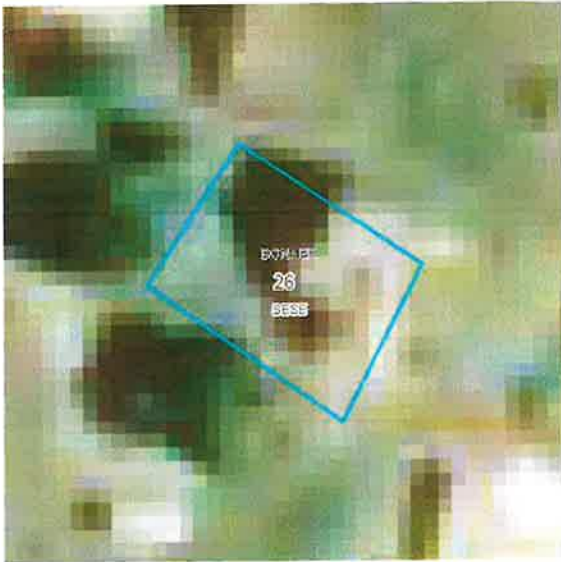
CFS	AF	KW
0.04		

8. Place of Use:

Water Use	Total Claimed Acreage
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DOMESTIC								
Township	Range	Section	QQ	Q	County	Govt Lot	Acres	
57N	05W	26	SE	SE	BONNER			

**RECEIVED
MAY 19 2022
IDWR / NORTH**



9. Remarks:

10. Other Water Rights:

11. Basis:

Basis
Beneficial Use

12. 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 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: 1

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): Dennis Dwyer Date: 5/5/22

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

Title of _____ Organization

that I have signed the foregoing document in the space below as

Title of _____ Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____



Well

