

Bell, Chace

From: Bell, Chace
Sent: Monday, April 24, 2023 4:33 PM
To: Jared Horlacher
Subject: RE: Priest Lake Water LLC
Attachments: 97-7368 AMENDED NOTICE OF CLAIM.pdf

Dear Mr. Horlacher,

As per our phone conversation and conversation in the office, I am sending you an Amended Notice of Claim to a Water Right form. For your convenience, I completed changes for you, utilizing all the information we discussed during our call and from the existing claim. If any additional changes are made, please initial next to those changes before signing the claim form. After your review, please sign claim forms and return the amended claim form to our office at the address listed below. I have also included a map of the current service area with the claim, please verify the parcels selected are accurate and make changes if necessary.

Please do not hesitate to contact our office if you have any questions or concerns. We can be reached by phone during business hours at 208-762-2800.

Best Regards,

Chace Bell
Sr. Water Resource Agent
Idaho Department of Water Resources, Northern Region
7600 N Mineral Drive, Suite 100
Coeur d'Alene, ID 83815-7763
Phone (208) 762-2802 / 2800
<https://idwr.idaho.gov>



From: Jared Horlacher <jaredhorlacher@yahoo.com>
Sent: Friday, April 21, 2023 8:22 AM
To: Bell, Chace <Chace.Bell@idwr.idaho.gov>
Subject: Priest Lake Water LLC

CAUTION: This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

Good morning Chace,

**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: 97-7368
Date Received: 9/22/2021
Receipt No: N037476
Claim Fee:
Received By: _____

AMENDED

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

PRIEST LAKE WATER LLC
279 TRACY LN
PRIEST LAKE ID 83856

Phone: (509) 993-7013

2. Date of Priority: 10/10/1995

3. Source:

GROUND WATER
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
60N	05W	36	SW NE		BONNER	
60N	05W	36	SW NE		BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
MUNICIPAL	01/01	12/31	0.45		127

7. Total Quantity Appropriated is:

0.45 C.F.S. and/or 127 A.F.A.

8. Non-irrigation uses:

DOMESTIC USE IS FOR 106 HOMES

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
60N	05W	36	NE		NE		
60N	05W	36	SW		NE		
60N	05W	36	SE		NE		
60N	05W	36	SE		NW		
60N	05W	36	NE		SE		

10. Do you own the property listed above as place of use? No

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:

Domestic use is for 106 homes.

The irrigation occurring under this domestic use shall not exceed 1/2 acre per lot.

After specific notification by the department, the right holder shall install a suitable measuring device or shall enter into an agreement with the department to determine the amount of water diverted from power records and shall annually report the information to the department.

This right does not grant any right-of-way or easement across the land of another.

Place of use is located within Lots 1-17, Blk. 1; Lots 1-20, Blk. 2; Lots 1-10, Blk. 3; Lots 1-25, Blk. 4; Lots 1-12, Blk. 5; Lots 1-12, Blk. 6; and Lots 1-10, Blk. 7; Marvin Estates.

Points of diversion are located in, Blk. 4 well lot, Marvin Estates.

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: 1

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

_____ of _____
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 _____ Date _____

Printed Name of Authorized Agent _____

PRIEST LAKE WATER ASSN. 97-7368



2021 AERIAL IMAGERY