

Roda, Evan

From: Mike Dodge <mdodge52@gmail.com>
Sent: Tuesday, September 26, 2023 9:30 AM
To: Roda, Evan
Cc: GMail; Laura Dodge Aschenbrener
Subject: Irrigation Water right
Attachments: 97-7341_AmendedNoticeOfClaim (004).docx

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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

COPY

Ident. Number: 97-7341
Date Received:
Receipt No: N038286
Claim Fee: \$51.00
Received By: _____

AMENDED

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

1. Name of Claimant(s)

MIKE DODGE
770 GOVERNMENT WAY
COEUR D ALENE ID 83814

Phone: (208) 660-2123

2. Date of Priority: 11/8/1993

3. Source:
PRIEST RIVER

Trib. to:
PEND OREILLE RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼	County
57N	04W	29	SE 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	3 /15	11/15	0.03		1.5

7. Total Quantity Appropriated is:

0.03 C.F.S. and/or 1.5 A.F.A.

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	04W	29	SE		NW		0.2

Township	Range	Section	¼	of	¼	Lot	Acres
57N	04W	29	SW		NW		0.3

Total Acres = 0.5

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:

shared point of diversion with the domestic water right no. 97-7504.

12. Remarks:

Priority Date Explanation:

PLACE OF USE AND POINT OF DIVERSION ARE LOCATED AT 494 EL RIO DRIVE, AND HAVE BEEN AT THIS LOCATION SINCE THE LICENSE WAS ISSUED.

13. Basis of Claim: License

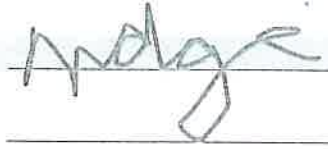
14. Signature(s)

(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 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: 9/26/23

_____ Date: _____

COPY