

**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 96-9836
Date Received: 5/25/2023
Receipt No:

RECEIVED
MAY 30 2023
IDWR / NORTH

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
STEVEN KLATT	285 PRIVATE DRIVE	SAGLE	ID	UNITED STATES	83860

2. Date of Priority:

Date	Explanation
12/28/2020	Water use in place at that time

3. Source:

Source	Tributary
UNNAMED POND	LAKE PEND OREILLE

4. Point of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County	Type	Description
56N	01W	15		NW	SW	BONNER		

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

Water Use	Number Of Homes	Stock	Number of Stock	Description
IRRIGATION				
FIRE PROTECTION				Irrigation system in place for Irrigation & fire protection

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	04/01	10/31
FIRE PROTECTION	01/01	12/31

7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	0.02	8.50	
FIRE PROTECTION	0.02		

Totals

CFS	AF	KW
0.04	8.50	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	7.10

IRRIGATION							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
56N	01W	15	NW	SW	BONNER		4.60
56N	01W	15	SW	NW	BONNER		2.50

FIRE PROTECTION							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
56N	01W	15	SW	NW	BONNER		
56N	01W	15	NW	SW	BONNER		
56N	01W	16	SE	NE	BONNER		

9. Remarks:

10. Other Water Rights:

N/A

11. Basis:

Basis
License

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: _____

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): Steve Klott Date: May 25th 23

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 _____

Please print name