

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL
DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS**

RECEIVED
MAY 09 2024
IDWR / NORTH

IN RE THE GENERAL ADJUDICATION CIVIL CASE
NUMBER: 69576
OF RIGHTS TO THE USE OF WATER FROM
THE CLARK FORK-
PEND OREILLE RIVER
BASIN WATER
SYSTEM Ident.

Number: 96-9757

Date Received: 5/9/24

Receipt No: N044631

Claim Fee: \$51.00

Received By: YMB

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

1. Name of Claimant(s)

PHILIP L KINZLER Phone: (208) 255-6624
371 LIBERTY LN
SAGLE ID 83860-8461

AND/OR

KARIN E KINZLER Phone: (208) 255-9551
371 LIBERTY LN
SAGLE ID 83860-8461

2. Date of Priority: 6/21/2019

3. Source: Trib. to:
GROUND WATER

4. Point of Diversion:

Township	Range	Section	1/4	of	
1/4 of	1/4 Lot	County	Type		
56N	02W	27	NW	NE	BON

NER

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.03		0.6
IRRIGATION	04/01	10/31	0.03		3

7. Total Quantity Appropriated is:

0.03 C.F.S. and/or 3.6 A.F.A.

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME

9. Place of use:

DOMESTIC within BONNER County

Township Range Section $\frac{1}{4}$ of $\frac{1}{4}$ Lot Acres
56N 02W 27 NW NE

IRRIGATION within BONNER County

Township Range Section $\frac{1}{4}$ of $\frac{1}{4}$ Lot Acres
56N 02W 27 NW NE 1

Total Acres = 1

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:

12. Remarks:

Priority Date Explanation:

Domestic use is for 1 home. Irrigation of lawn, garden and

landscaping associated with the home is authorized under the irrigation component of this right.

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):

Ben Zuck

Date:

5-6-24

ate:

Karin E. King
5-6-24

D