

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: 96-2259
Date Received: 5/31/24
Receipt No: N644718
Claim Fee: \$134.00
Received By: YMB

Mailing address (county changed)
314 Servery Lane
Priest River, ID
83856

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED
MAY 31 2024

IDWR / NORTH

1. Name of Claimant(s)

LARRY KNUTSON

~~668 EDGEMERE CUTOFF RD~~
PRIEST RIVER ID 83856

Phone: (208) 265-6477

Cell 255-8639

AND

MARY JO KNUTSON

~~668 EDGEMERE CUTOFF RD~~
PRIEST RIVER ID 83856

Phone: (208) 265-6477

610-8293

2. Date of Priority: 5/16/1960

3. Source:

HOODOO CREEK
HOODOO CREEK

Trib. to:

PEND OREILLE RIVER
PEND OREILLE RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
55N	04W	34	NW SW		BONNER	
55N	04W	34	SW SW		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	1.39		252

7. Total Quantity Appropriated is:

1.39 C.F.S. and/or 252 A.F.A.

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within BONNER County

Township	Range	Section	¼	of ¼	Lot	Acres
55N	04W	34	NE	SW		23
55N	04W	34	NW	SW		23
55N	04W	34	SW	SW		26
55N	04W	34	SE	SW		12

Total Acres = 84

10. Do you own the property listed above as place of use? ~~No~~ *yes, we do own it & live here LTK on property*
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:

P/D IN W 1/2SW1/4, S34, T55N, R4W.

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 ~~not~~ *what is the own. fee* 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): Larry T Kintson Date: 5-28-24

Date: _____