

FEB 14 2023

DEPARTMENT OF
WATER RESOURCESIN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLSIN 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: 96-8254
Date Received: 2/10/2023
Receipt No: C115296
Claim Fee: \$55.00
Received By: KUNOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

MICHAEL D BOECK

~~6290 HWY 2~~ 20413 Hwy 2
SANDPOINT ID 83864

Phone:

208-263-6354

2. Date of Priority: 6/17/1983

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
57N	03W	33	SE SE	1	BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	1/01	12/31	0.04		1.2
IRRIGATION	4/01	11/01	0.02		3

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 4.2 A.F.A.

8. Non-irrigation uses:

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	03W	33	SE		SE	1	

IRRIGATION within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	03W	33	SE		SE	1	1

Total Acres = 1

10. Do you own the property listed above as place of use? ~~No~~ 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 2 homes.

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: N/A

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): Michael D. Boeck Date: 2/10/23

Date: _____