

**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: 96-8228
Date Received:
Receipt No: T114172
Claim Fee:
Received By: _____

RECEIVED
AUG 27 2026
IDWR / NORTH

AMENDED

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

1. Name of Claimant(s)

MICHELLE TINGLE
1435 EAGEN MOUNTAIN DR
HOPE ID 83836

Phone: (941) 587-5977

AND/OR

WILLIAM TINGLE
1435 EAGEN MOUNTAIN DR
HOPE ID 83836

Phone: (941) 321-4096

2. Date of Priority: 6/7/1983

3. Source:

SPRING
UNNAMED STREAM

Trib. to:

LAKE PEND OREILLE
LAKE PEND OREILLE

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
57N	01E	21	SE NE		BONNER	
57N	01E	21	SE NE		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	0.02		
IRRIGATION	3/15	11/15	0.03		

7. Total Quantity Appropriated is:

0.05 C.F.S.

8. Non-irrigation uses:

Irrigation for plants, trees, etc.
Household water

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	01E	21	SW		NE		
57N	01E	21	SE		NE		
57N	01E	21	NE		SE		
57N	01E	21	NW		SE	3	

IRRIGATION within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	01E	21	SW		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:

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 _____ 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):

Will JTV

Date:

8/24/24

Michelle Tingle

Date:

8/24/24