

**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 KOOTENAI RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 89576

Ident. Number 98-4245

Date Received: 9/23/2026

Receipt No:

N046517

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
TAMMIE M KENNEY	4101 FARM TO MARKET RD	BONNERS FERRY	ID	UNITED STATES	83805

2. Date of Priority:

Date	Explanation
5/1/1906	

3. Source:

Source	Tributary
SPRINGS	SINKS

4. Point of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County	Type	Description
65N	01W	26		NE	SW	BOUNDARY		DEVELOPED SPRING WITH GRAVITY FLOW PIPELINE TO 3 STORAGE TANKS FOR USE.

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

Water Use	Number Of Homes	Stock	Number of Stock	Description
DOMESTIC	1			DOMESTIC USE
IRRIGATION		Cattle	7	STOCKWATER FOR 7 HEAD OF CATTLE
STOCKWATER				

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1/01	12/31
IRRIGATION	3/31	11/02
STOCKWATER	1/01	12/31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.04		
IRRIGATION	0.04		
STOCKWATER	0.02		

Totals

CFS	AF	KW
0.04		

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	2.00

DOMESTIC							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
65N	01W	26	NW	SW	BOUNDARY		
IRRIGATION							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
65N	01W	26	NW	SW	BOUNDARY		2.00
STOCKWATER							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
65N	01W	26	NW	SW	BOUNDARY		

 Place Of Use Map

 Place Of Use Map

 Place Of Use Map

9. Remarks:

10. Other Water Rights:

11. Basis:

Basis
Statutory Claim

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 Kootenai 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):  Date: 9-23-26

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,

Title
Organization

that I have signed the foregoing document in the space below as

_____ of _____,

Title
Organization