

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 KOOTNENAI RIVER BASIN WATER  
SYSTEM

CIVIL CASE NUMBER: 89576

Ident. Number: 98-7638  
Date Received:  
Receipt No:  
Claim Fee: \$25.00  
Received By: N046507

RECEIVED

SEP 23 2026

IDWR / NORTH

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

JANTZ REVOCABLE TRUST  
520061 HWY 95  
BONNERS FERRY ID 83805

Phone:

2. Date of Priority: 2/29/1988

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

| Township | Range | Section | ¼ of ¼ of ¼ | Lot | County   | Type |
|----------|-------|---------|-------------|-----|----------|------|
| 64N      | 01E   | 33      | SE NE       |     | BOUNDARY |      |

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    |
| STOCKWATER | 1/01 | 12/31 | 0.02   |      | 0.1    |

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 1.3 A.F.A.

8. Non-irrigation uses:

9. Place of use:

STOCKWATER within BOUNDARY County

| Township | Range | Section | ¼  | of | ¼  | Lot | Acres |
|----------|-------|---------|----|----|----|-----|-------|
| 64N      | 01E   | 33      | SE |    | NE |     |       |

DOMESTIC same as STOCKWATER

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:

Stockwater is for 10 range cattle; domestic use is for 1 home.

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 KOOTENAI 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: 0

**For Organizations:**

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

|                             |    |                                     |
|-----------------------------|----|-------------------------------------|
| <u>Trustee</u>              | of | <u>Janitz Rev Trust</u>             |
| Agents Title (please print) |    | Name of Organization (please print) |

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent [Signature] Date 9-22-24

Printed Name of Authorized Agent TIM JANTZ