

JUN 29 2026

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,  
IN AND FOR THE COUNTY OF TWIN FALLS

By \_\_\_\_\_  
CIVIL CASE NUMBER: 49576  
Clerk  
Deputy Clerk

IN RE THE GENERAL ADJUDICATION  
OF RIGHTS TO THE USE OF WATER FROM  
THE COEUR D'ALENE-SPOKANE RIVER  
BASIN WATER SYSTEM

Ident. Number: 95-18778  
Date Received: 6/23/2026  
Receipt No:  
Claim Fee:  
Received By: \_\_\_\_\_

**NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW  
For Domestic and/or Stockwater Purposes  
Where Daily Use is less than 13,000 gallons per day**

1. Name of Claimant(s)

DAVID J RENELLE AND LISA M RENELLE 2003 REVOCABLE TRUST  
PO BOX 884  
ATHOL ID 83801

Phone: (805) 674-2932

2. Date of Priority: 7/1/2023

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
53N	03W	30	SW NE		KOOTENAI	

5. Description of diverting works:

DRILLED WELL WITH PIPELINE TO HOME AND SHOP.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S. (or)	A.F.A
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

DOMESTIC USE FOR ONE HOME AND ONE SHOP. WE LIVED IN THE SHOP UNTIL THE HOME WAS COMPLETED SHORTLY AFTERWARDS.

9. Place of use:

DOMESTIC within KOOTENAI County

Township	Range	Section	¼	of	¼	Lot	Acres
53N	03W	30	SW		NE		

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:  
APPROXIMATE DATE WELL USE BEGAN DURING CONSTRUCTION OF SHOP AND HOME

13. Basis of Claim: Beneficial Use

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 COEUR D'ALENE-SPOKANE 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: 2

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

Trustee of DAVID J + RISA M Renelle 2003 Revocable Trust  
 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 David Joseph Renelle Date 6-23-26

Printed Name of Authorized Agent David Joseph Renelle



Identify

Identify from: **Parcels**

- Parcels
  - DAVID J RENELLE AND LISA M RENELLE 2003 REVOCABLE TRUST

Location: 2,294,586.523 1,860,603.175 Meters

Field	Value
ID	19209227
UPDATED	4/6/2026
PIN	0L2990010020
OWNER	DAVID J RENELLE AND LISA M RENELLE 2003 REVOCABLE TRUST
ADDRESS1	PO BOX 884
ADDRESS2	<null>
CITY	ATHOL
STATE	ID
ZIPCODE	83801
P_ADDRESS	26658 N MICHELLE CT
P_ZIPCODE	<null>
SUB_NAME	LAZY MOOSE MEADOWS
LEGAL1	LAZY MOOSE MEADOWS, LT 2 BLK 1 3053N03W
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
ACRES	6
COUNTY	Kootenai
SOURCE	<null>
YEAR_BUILT	2024