

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

NAME AND ADDRESS: GREG TORGESEN
181 ARGONNE ST
SODA SPRINGS ID 83276

QUANTITY: 0.04 CFS

PRIORITY DATE: 06/01/1954

T07S R40E S26 SENENW Within CARIBOU County

PURPOSE OF USE

PERIOD OF USE

QUANTITY

STOCKWATER

04/01 11/01

0.040 CFS

PLACE OF USE: STOCKWATER Within CARIBOU County

T07S R40E S26 NENW

THIS PARTIAL DECREE IS SUBJECT TO SUCH GENERAL PROVISIONS
NECESSARY FOR THE DEFINITION OF THE RIGHTS OR FOR THE EFFICIENT
ADMINISTRATION OF THE WATER RIGHTS AS MAY BE ULTIMATELY
DETERMINED BY THE COURT AT A POINT IN TIME NO LATER THAN THE
ENTRY OF A FINAL UNIFIED DECREE. SECTION 42-1412(6), IDAHO CODE.

EXPLANATORY MATERIAL: Beneficial Use

02/18/2003

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: April 21, 2003

Water right number: 29-13303

GREG TORGESEN
181 ARGONNE ST
SODA SPRINGS ID 83276
Telephone Number: (208)547-4300

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):
2. Describe the changes you wish to make in the proposed recommendation:
3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE:

2/26/07

SIGNATURE:

Greg Torgesen

Please print your name:

Greg Torgesen

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161

*Our address has changed to
P.O. Box 517 in Soda Springs.*



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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 29-13303
Date Received: 3/1/2002
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

GREG TORGESEN Phone: (208)547-4300

181 ARGONNE ST
SODA SPRINGS ID USA 83276

2. Date of Priority: 06/01/1954

3. Source: SPRINGS Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
07S	40E	26	SE NE NW	CARIBOU	

5. Description of diverting works:

COLLECTION BOX WITH PIPE TO WATERING TROUGHS

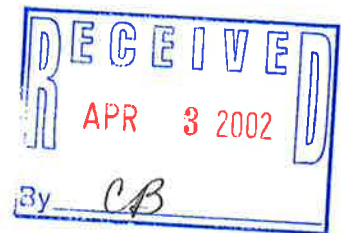
6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	04/01	11/01	0.04	

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:



10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
07S	40E	26	NE	NW	STOCKWATER	

11. Place of use in counties: CARIBOU

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

STOCKWATER, 100 RANGE CATTLE

15. Basis of Claim: Beneficial Use

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 SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576
Ident. Number 29-13303
Date Received 3-1-02
Receipt Number E027496

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

1. Name of Claimant(s) Greg Torgesen Phone (208) 547-4300 ext 367

Mailing Address 181 Argonne St. Soda Springs, ID Zip 83276

2. Date of Priority (Only (1) per claim) June 1, 1954

3. Source of water supply (a) Spring

which is tributary to (b) Sinks

4.a. Location of existing

point of diversion is: Township 07S Range 40E Section 26 1/4 of SE 1/4 of
NE 1/4, NW 1/4 Govt. Lot _____, E.B.M., County of CARIBOU

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, 1/4 of _____ 1/4 of _____ 1/4, Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, 1/4 of _____ 1/4 of _____ 1/4 Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. COLLECTION BOX WITH PIPE TO WATERING TROUGHS

6. Water is claimed for the following purposes:

(Both dates are inclusive) (cfs) (acre feet)

For Stockwater purposes from 4-1 to 11-1 amount 0.04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.04 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is deminimus acre feet per annum.

- [illegible]

11. In which county(ies) are lands listed above as place of use located? CARIBOU

13. Describe any other water rights used at the same place and for the same purposes as described above.
NONE or None ()

15. Basis of Claim (Check one) Beneficial Use X Posted Notice _____ Permit _____ Decree _____ License _____
If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant

Signature of Claimant(s) Greg Longene Date 2/26/02

For Organizations: I do solemnly swear or affirm that I am _____ of _____ (Title) _____, that I have signed the foregoing document in the space below as (Organization) _____ of _____ and that the statements contained in the

Last Name GREG TORGESON Ident. Number _____

(Title) (Organization)
foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho)
County of Carbon) SS.

Subscribed and sworn (or affirmed) before me this 26th day of February 2002 ~~March, 2001~~.

Witness Signature of
Greg Torgeson 02/26/02

Notary Public Sharon Averett
Residing at Soda Springs ID
My Commission Expires 1-10-2006



17. Notice of Appearance:

Notice is hereby given that I, Kent W. Foster, will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature [Signature]
Address PO Box 50130 Idaho Falls, ID 83405
Date 2/27/02

Last Name GREG TORGESON Ident. Number _____

