

**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 BEAR RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 79576

Ident. Number: 13-232  
Date Received: 11/20/2024  
Receipt No: PO01596  
Claim Fee: \$175  
Received By: m3

**RECEIVED**

NOV 22 2024

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

**IDWR/Preston**

**1. Name of Claimant(s)**

WHITNEY NASHVILLE WATER WORKS CO INC  
1863 S 2400 E  
PRESTON ID 83263

Phone: (208) 221-8827

**2. Date of Priority:** 6/11/1910

**3. Source:**

SPRING  
SPRING

**Trib. to:**

SPRING CREEK  
SPRING CREEK

**4. Point of Diversion:**

| Township | Range | Section | ¼ of ¼ of ¼ | Lot | County   | Type |
|----------|-------|---------|-------------|-----|----------|------|
| 15S      | 40E   | 20      | NW SE       |     | FRANKLIN |      |
| 15S      | 40E   | 20      | SW SE       |     | FRANKLIN |      |

**5. Description of diverting works:**

Perforated pipe to solid pipe to concrete collection box to mainline.  
Perforated pipe to solid pipe to concrete collection box to mainline.

**6. Water is used for the following purposes:**

| Purpose   | From  | To    | C.F.S. | (or) | A.F.A |
|-----------|-------|-------|--------|------|-------|
| MUNICIPAL | 01/01 | 12/31 | 1.25   |      | 101   |

**7. Total Quantity Appropriated is:**

1.25 C.F.S. and/or 101 A.F.A.

**8. Non-irrigation uses:**

9. Place of use:

MUNICIPAL within FRANKLIN County

| Township | Range | Section | ¼  | of | ¼  | Lot | Acres |
|----------|-------|---------|----|----|----|-----|-------|
| 15S      | 39E   | 25      | SW |    | NE |     |       |
| 15S      | 39E   | 25      | SE |    | NE |     |       |
| 15S      | 39E   | 25      | SE |    | NW |     |       |
| 15S      | 39E   | 25      | NE |    | SW |     |       |
| 15S      | 39E   | 25      | SE |    | SW |     |       |
| 15S      | 39E   | 25      | NE |    | SE |     |       |
| 15S      | 39E   | 25      | NW |    | SE |     |       |
| 15S      | 39E   | 25      | SW |    | SE |     |       |
| 15S      | 39E   | 25      | SE |    | SE |     |       |
| 15S      | 39E   | 35      | SE |    | NE |     |       |
| 15S      | 39E   | 35      | NE |    | SE |     |       |
| 15S      | 39E   | 35      | SE |    | SE |     |       |
| 15S      | 39E   | 36      | NE |    | NE |     |       |
| 15S      | 39E   | 36      | NW |    | NE |     |       |
| 15S      | 39E   | 36      | SW |    | NE |     |       |
| 15S      | 39E   | 36      | SE |    | NE |     |       |
| 15S      | 39E   | 36      | NE |    | NW |     |       |
| 15S      | 39E   | 36      | SW |    | NW |     |       |
| 15S      | 39E   | 36      | SE |    | NW |     |       |
| 15S      | 39E   | 36      | NE |    | SW |     |       |
| 15S      | 39E   | 36      | NW |    | SW |     |       |
| 15S      | 39E   | 36      | SW |    | SW |     |       |
| 15S      | 39E   | 36      | SE |    | SW |     |       |
| 15S      | 39E   | 36      | NE |    | SE |     |       |
| 15S      | 39E   | 36      | NW |    | SE |     |       |
| 15S      | 39E   | 36      | SW |    | SE |     |       |
| 15S      | 39E   | 36      | SE |    | SE |     |       |
| 15S      | 40E   | 19      | SW |    | SW | 4   |       |
| 15S      | 40E   | 19      | SE |    | SW |     |       |
| 15S      | 40E   | 19      | SW |    | SE |     |       |
| 15S      | 40E   | 19      | SE |    | SE |     |       |
| 15S      | 40E   | 20      | NE |    | SW |     |       |
| 15S      | 40E   | 20      | NW |    | SW |     |       |
| 15S      | 40E   | 20      | SW |    | SW |     |       |
| 15S      | 40E   | 20      | SE |    | SW |     |       |
| 15S      | 40E   | 20      | NE |    | SE |     |       |
| 15S      | 40E   | 20      | NW |    | SE |     |       |
| 15S      | 40E   | 20      | SW |    | SE |     |       |
| 15S      | 40E   | 20      | SE |    | SE |     |       |
| 15S      | 40E   | 29      | NE |    | NW |     |       |

|     |     |    |    |    |   |
|-----|-----|----|----|----|---|
| 15S | 40E | 29 | NW | NW |   |
| 15S | 40E | 29 | SW | NW |   |
| 15S | 40E | 29 | SE | NW |   |
| 15S | 40E | 29 | NE | SW |   |
| 15S | 40E | 29 | NW | SW |   |
| 15S | 40E | 29 | SW | SW |   |
| 15S | 40E | 29 | SE | SW |   |
| 15S | 40E | 30 | NE | NE |   |
| 15S | 40E | 30 | NW | NE |   |
| 15S | 40E | 30 | SW | NE |   |
| 15S | 40E | 30 | SE | NE |   |
| 15S | 40E | 30 | NE | NW |   |
| 15S | 40E | 30 | NW | NW | 1 |
| 15S | 40E | 30 | SW | NW | 2 |
| 15S | 40E | 30 | SE | NW |   |
| 15S | 40E | 30 | NE | SW |   |
| 15S | 40E | 30 | NW | SW | 3 |
| 15S | 40E | 30 | SW | SW | 4 |
| 15S | 40E | 30 | SE | SW |   |
| 15S | 40E | 30 | NE | SE |   |
| 15S | 40E | 30 | NW | SE |   |
| 15S | 40E | 30 | SW | SE |   |
| 15S | 40E | 30 | SE | SE |   |
| 15S | 40E | 31 | NE | NE |   |
| 15S | 40E | 31 | NW | NE |   |
| 15S | 40E | 31 | SW | NE |   |
| 15S | 40E | 31 | SE | NE |   |
| 15S | 40E | 31 | NE | NW |   |
| 15S | 40E | 31 | NW | NW | 1 |
| 15S | 40E | 31 | SW | NW | 2 |
| 15S | 40E | 31 | SE | NW |   |
| 15S | 40E | 31 | NE | SW |   |
| 15S | 40E | 31 | NW | SW | 3 |
| 15S | 40E | 31 | SW | SW | 4 |
| 15S | 40E | 31 | SE | SW |   |
| 15S | 40E | 31 | NE | SE |   |
| 15S | 40E | 31 | NW | SE |   |
| 15S | 40E | 31 | SW | SE |   |
| 15S | 40E | 31 | SE | SE |   |
| 15S | 40E | 32 | NE | NW |   |
| 15S | 40E | 32 | NW | NW |   |
| 15S | 40E | 32 | SW | NW |   |
| 15S | 40E | 32 | NW | SW |   |
| 15S | 40E | 32 | SW | SW |   |
| 15S | 40E | 32 | SE | SW |   |
| 16S | 39E | 1  | SW | NE | 2 |
| 16S | 39E | 1  | SE | NE | 1 |

|     |     |    |    |    |   |
|-----|-----|----|----|----|---|
| 16S | 39E | 1  | SE | SW |   |
| 16S | 39E | 1  | NE | SE |   |
| 16S | 39E | 1  | NW | SE |   |
| 16S | 39E | 1  | SW | SE |   |
| 16S | 39E | 1  | SE | SE |   |
| 16S | 39E | 12 | NE | NE |   |
| 16S | 39E | 12 | NW | NE |   |
| 16S | 39E | 12 | SE | NE |   |
| 16S | 39E | 12 | NE | NW |   |
| 16S | 40E | 5  | NW | NW |   |
| 16S | 40E | 5  | NW | SW |   |
| 16S | 40E | 5  | SW | SW |   |
| 16S | 40E | 6  | NE | NE |   |
| 16S | 40E | 6  | NW | NE |   |
| 16S | 40E | 6  | NE | NW |   |
| 16S | 40E | 6  | NW | NW |   |
| 16S | 40E | 6  | NE | SW |   |
| 16S | 40E | 6  | NW | SW | 5 |
| 16S | 40E | 6  | SW | SW | 6 |
| 16S | 40E | 6  | SE | SW |   |
| 16S | 40E | 6  | NE | SE |   |
| 16S | 40E | 6  | NW | SE |   |
| 16S | 40E | 6  | SW | SE |   |
| 16S | 40E | 6  | SE | SE |   |
| 16S | 40E | 7  | NE | NE |   |
| 16S | 40E | 7  | NW | NE |   |
| 16S | 40E | 7  | SW | NE |   |
| 16S | 40E | 7  | SE | NE |   |
| 16S | 40E | 7  | NE | NW |   |
| 16S | 40E | 7  | NW | NW | 1 |
| 16S | 40E | 7  | SW | NW | 2 |
| 16S | 40E | 7  | SE | NW |   |
| 16S | 40E | 7  | NE | SE |   |
| 16S | 40E | 7  | SE | SE |   |
| 16S | 40E | 8  | SW | NE |   |
| 16S | 40E | 8  | NW | NW |   |
| 16S | 40E | 8  | SW | NW |   |
| 16S | 40E | 8  | SE | NW |   |
| 16S | 40E | 8  | NE | SW |   |
| 16S | 40E | 8  | NW | SW |   |
| 16S | 40E | 8  | SW | SW |   |
| 16S | 40E | 8  | SE | SW |   |
| 16S | 40E | 8  | NW | SE |   |
| 16S | 40E | 8  | SW | SE |   |
| 16S | 40E | 17 | NE | NW |   |
| 16S | 40E | 17 | NW | NW |   |
| 16S | 40E | 18 | NE | NE |   |

10. Do you own the property listed above as place of use? No

If your answer is no, describe in remarks below the authority you have to claim this water right.

\_This claim is for a municipal water company. The properties are individually owned.\_\_\_\_\_

11. Other Water Rights Used:

13-2250, 13-7528.

12. Remarks:

Priority Date Explanation:

This is the date given on the decree. This use continues to this day.

Filing this claim as municipal use because we service more than 15 households and are regulated by DEQ.

13. Basis of Claim: Decreed

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 BEAR 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 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

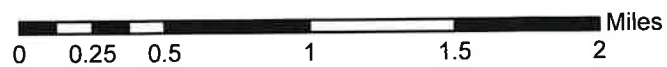
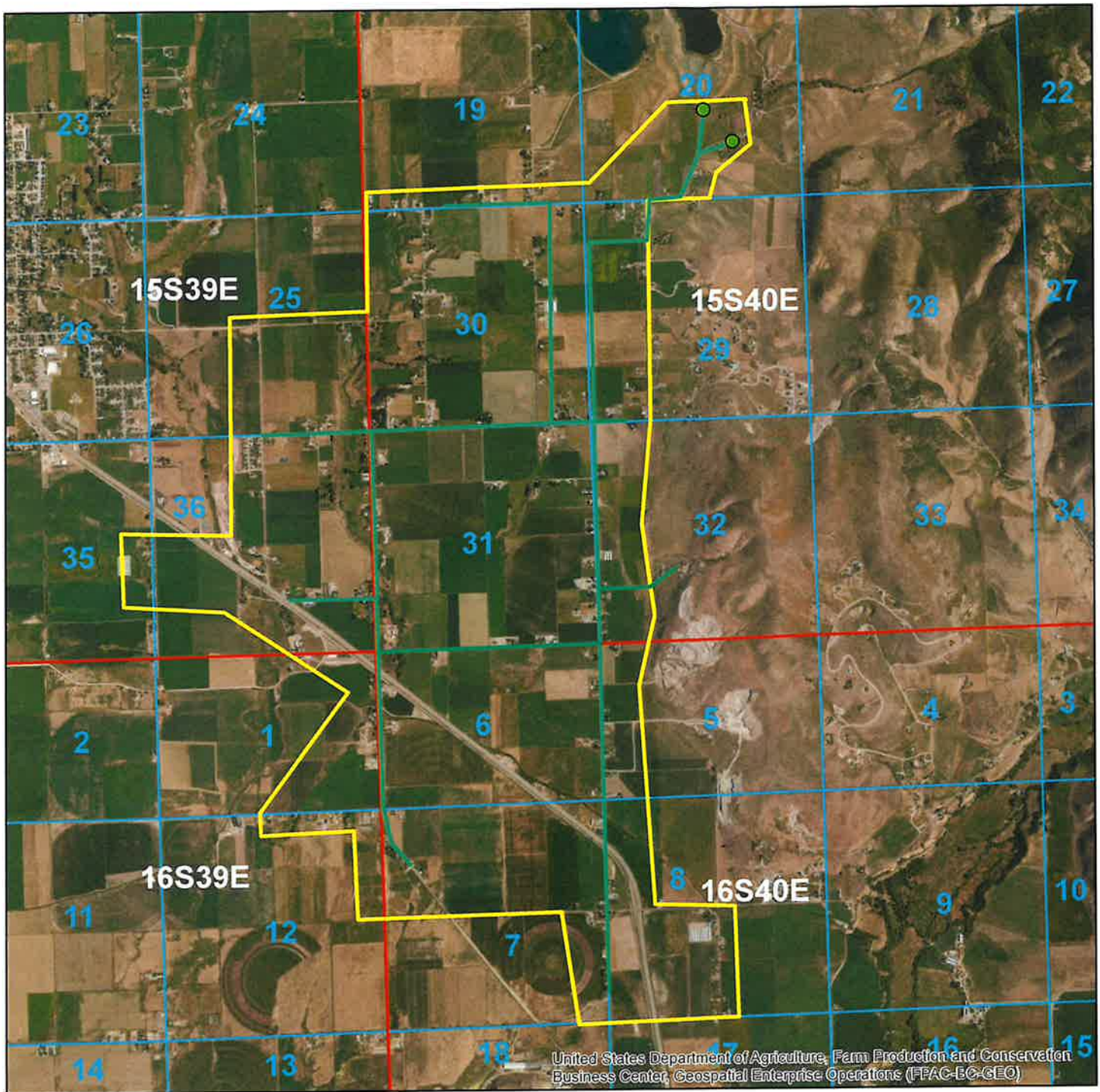
\_\_\_\_\_, President \_\_\_\_\_ of \_\_\_\_\_ WHITNEY NASHVILLE WATER WORKS CO INC \_\_\_\_\_,  
Agents Title (please print) Name of Organization (please print)

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

Signature of Authorized Agent Daren Foster Date 11-22-24

Printed Name of Authorized Agent Daren Foster

# Claim 13-232



POD ●  
Service Boundary —  
Mainline —

