

**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: 13-7422
Date Received: 1/28/2025
Receipt No: 700176
Claim Fee: \$51
Received By: MB

RECEIVED

JAN 28 2025

IDWR/Preston

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

1. Name of Claimant(s)

ROSS AND LEONE SMITH REVOCABLE TRUST
14416 N HWY 34
THATCHER ID 83283

Phone: (208) 427-6227

2. Date of Priority: 8/30/1984

3. Source:
SPRING

Trib. to:
WILLIAMS CREEK

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
12S	41E	20	SW SW		FRANKLIN	

5. Description of diverting works:

Water right was originally diverted from a spring. Now, the spring water flows into Williams Creek and we divert directly from Williams Creek to the pond through a pipeline and an open ditch. Water flows through the pond and back into the creek.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
RECREATION STORAGE	01/01	12/31			0.1

7. Total Quantity Appropriated is:

C.F.S. and/or 0.1 A.F.A.

8. Non-irrigation uses: Recreation storage for a small pond.

9. Place of use:

RECREATION STORAGE within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
12S	41E	19	SE		SE		

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

11. Other Water Rights Used: None.

12. Remarks:

Priority Date Explanation:

Priority date from license.

Use of water under this right shall be non-consumptive.

Source known locally as Ed Jensen's Spring.

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 BEAR River Basin Adjudication." (b.) I/We do X 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

_____ of _____
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 _____ Date _____

Printed Name of Authorized Agent _____

BRBA Claim 13-7422



Legend

- Claim POD
- Claim POU
- Township/Range
- Sections
- QQ

0 150 300 600 Feet

