

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 11-2020
Date Received: 2/6/2023
Receipt No: T115249

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
DONALD B CURTIS	351 BAILEY CREEK RD	SODA SPRINGS	ID	USA	83276-5607

2. Date of Priority:

Date	Explanation
4/7/1908	The priority date above is the original date the water right was issued to Harvey Higley. I submitted a transfer of water right for my parcel at 351 Bailey Creek Road for 1.8 acres in 2021 and it appears to be recorded.

3. Source:

Source	Tributary
BAILEY CREEK	BEAR RIVER
BAILEY CREEK	BEAR RIVER
BAILEY CREEK	BEAR RIVER
BAILEY CREEK	BEAR RIVER

4. Point of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County	Type	Description
10S	42E	5		SE	SW	BEAR LAKE		
10S	42E	5		NW	SW	BEAR LAKE		
10S	42E	5		SW	SW	BEAR LAKE		
10S	42E	5		NE	SW	BEAR LAKE		

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
IRRIGATION			
IRRIGATION			Pasture Irrigation.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	04/15	10/31
IRRIGATION	01/01	12/31

7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	0.04		
IRRIGATION	0.04		

Totals

CFS	AF	KW
2.70		

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	133.10
IRRIGATION	1.80

IRRIGATION							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
10S	42E	5	SE	NW	BEAR LAKE		1.80
IRRIGATION							
Township	Range	Section	QQ	Q	County	Govt Lot	Acres
10S	42E	5	SE	NW	BEAR LAKE		1.80

 Place of Use Map



9. **Remarks:**

10. **Other Water Rights:**

This water right will just be used for irrigation, and to keep my place watered in case of fire.

11. **Basis:**

Basis
License

12. **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 Water System 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 Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please print name