

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: 11-2092
Date Received: 11/16/2023
Receipt No: 7000709
Claim Fee: \$1275
Received By: MB

RECEIVED

JAN 02 2024

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

IDWR/Preston

1. Name of Claimant(s)

CITY OF SODA SPRINGS
9 W 2ND S
SODA SPRINGS ID 83276-1509

Phone: (208) 547-2600

2. Date of Priority: 6/25/1932

3. Source:
SODA CREEK

Trib. to:
BEAR RIVER

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
09S	42E	6	NW NW	4	CARIBOU	

5. Description of diverting works:

Headgate to Soda Canal to hydro plant and back to Soda Creek.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
POWER	1/01	12/31	48		

7. Total Quantity Appropriated is:

48 C.F.S.

8. Non-irrigation uses:

Power production for City.

9. Place of use:

POWER within CARIBOU County

Township	Range	Section	¼	of	¼	Lot	Acres
09S	42E	6	SW		SW	7	

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:

11-495

12. Remarks:

Priority Date Explanation:

Water right license and transfer 2972.

TRANS. 2972.

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 _____ 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

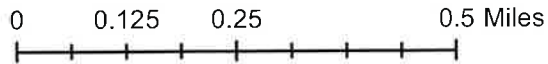
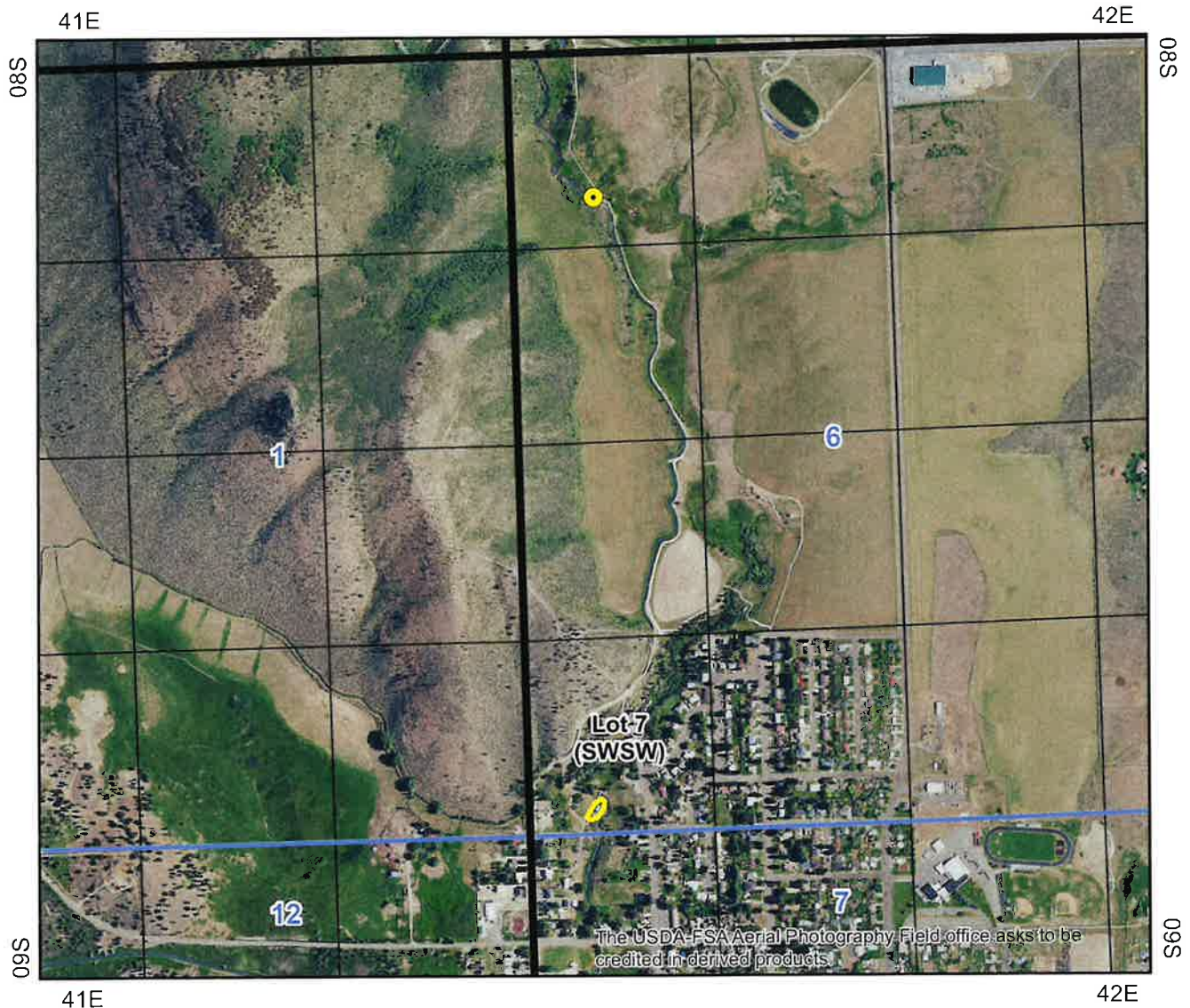
_____ of _____
Agents Title (please print) Name of Organization (please print)

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

Signature of Authorized Agent  Date 11/28/23

Printed Name of Authorized Agent Austin W Robinson, Mayor

State of Idaho
Department of Water Resources
Adjudication Claim
11-2092



-  Place Of Use Boundary
-  Townships
-  PLS Sections
-  Quarter Quarters
-  Point of Diversion
-  State Outline

