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Form No.42-1409-1 (Internet 06/21)

Department of Water Resources
Eastern Region**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**Claim ID: 11-4123Date Received: 2/2/23Receipt No: EC48885Claim Fee: \$280.00 By: M. J. Harris**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

Please type or print clearly

- Name of claimant(s) Sages Creek Partners LLC (c/o Rand Robison) Phone (208) 351-1070
Mailing address 503 North 4000 East Rigby Idaho Zip 83442
Street or Box City State
Email address (optional) rand.robison@gmail.com
- Date of priority: (Only one per claim) April 15, 1908 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (✓) (a) Sago Hollow Creek
which is tributary to (b) North Creek
- a. Location of point of diversion is: Township 12S, Range 43E, Section 28,
NE 1/4 of SE 1/4, Govt. Lot _____, BM, County of Bear Lake (Upper Reservoir)
Parcel no. _____
Additional points of diversion, if any: NESW (Middle Res), SESW (Lower Res), SESW (3x pump sites)
If available, GPS Coordinates NENW, Sec 33, T12S, R43E (pump site near house)
- b. If instream flow, beginning point of claimed instream flow is:
Township _____, Range _____, Section 4, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
Ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
- 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.
Three small reservoirs were built on Sago Hollow Creek and used for irrigation. Water was piped from upper
reservoir and middle reservoir and used for irrigation. The pipeline from the upper reservoir has fallen into
disrepair. The pipeline from the middle reservoir is actively used for gravity pressure irrigation. Water from the
reservoirs was also released into the creek channel for irrigation. Water has been pumped from creek at four
pump stations using a portable pump.

		(dates are inclusive MM-DD)		(cfs)	(acre-feet)
For	Irrigation Storage	purposes from	1/1 to 12/31	amount	or 16.0
For	Irrigation	purposes from	4/15 to 10/31	amount 3.00	or
For	Stockwater	purposes from	1/1 to 12/31	amount 0.20	or
For	Irrigation from Storage	purposes from	4/15 to 10/31	amount	or 16.0

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) 300 cow/calf pairs

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Parcel no(s). _____ Total number of acres irrigated 230

11. Do you own the property listed above as place of use? Yes (✓) No ()
If your answer is No, describe in Remarks below the authority you have to claim this water right.

_____ or None (✓)

~~In addition to the active irrigation from the creek, there is sufficient underground water coming through the drainage to sub-irrigate a sufficient number of acres below the house all the way to Sharon Loop Road.~~

Name of claimant(s) _____ Claim ID _____

14. Basis of claim (Check one) Beneficial Use (☒) Posted Notice (☐) License (☐) Permit (☐) Decree (☐)

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number 11-4123 (Stat. Claim)

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices 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: 1 map

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) A. Karl Robinson Date: 2/2/23

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Agent's title (Please print) _____ of _____
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 _____

16. Notice of Appearance:

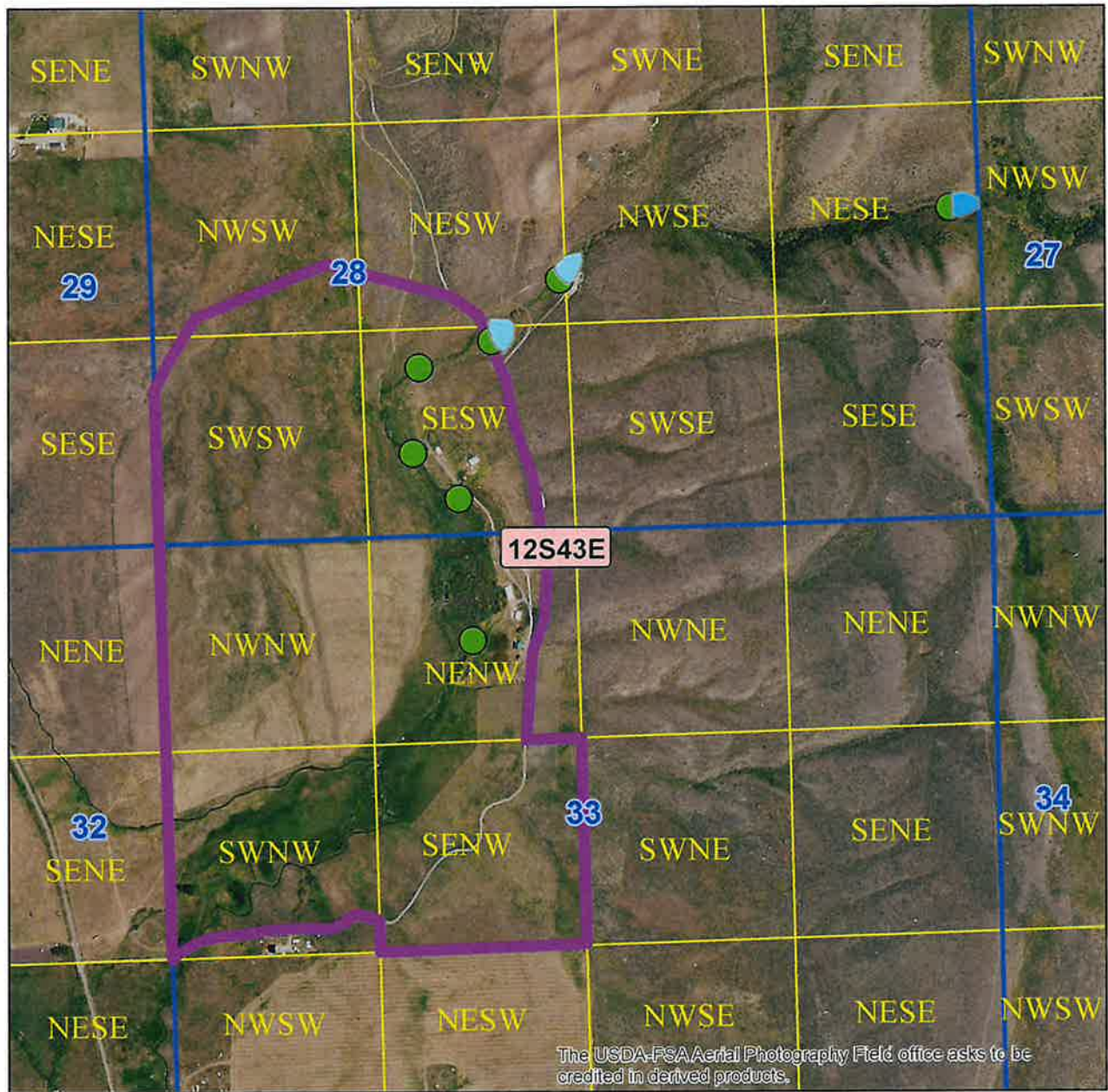
Notice is hereby given that I, (please print) _____, will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____

BRBA Claim for 11-4123



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