

**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**

RECEIVED

CIVIL CASE NUMBER: 79576

Claim ID: 11-7047

Date Received: 10/18/23

Receipt No: E049560

Claim Fee: \$438.40 By: CH

OCT 18 2023

Department of Water Resources
Eastern Region

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

Please type or print clearly

1. Name of claimant(s) Bryce W. Crane Phone ()

Mailing address 44 Smith Center Road Montpelier Idaho Zip 83254
Street or Box City State

Email address (optional)

2. Date of priority: (Only one per claim) 11/26/1973 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (✓) or Other () (a)
which is tributary to (b)

4. a. Location of point of diversion is: Township 11S, Range 44E, Section 28,
SW 1/4 of NW 1/4, Govt. Lot , BM, County of BEAR LAKE
Parcel no. 11S44E283600

Additional points of diversion, if any:

If available, GPS Coordinates

b. If instream flow, beginning point of claimed instream flow is:

Township , Range , Section , 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

5. 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.

Well was drilled in 1983 for Bert Westlake and is 193' deep with a diameter of 12". Currently has a 75 hp motor and delivers water to mainlines for pivot irrigation. The well is generally operated throughout the irrigation season through rotation between pivots depending on availability of surface water.

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD) (cfs) (acre-feet)

For Irrigation purposes from 4/15 to 10/15 amount 1.21 or 387

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1.21 (cfs) and/or (b) _____ (acre-feet)

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

9. Description of place of use:

- 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.

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
11S	44E	20								0.4	38	23	22	37		5	4		129.4
		28						8.5	7.5										16
		29	39	27	26	38	40	18	17	38									243

Parcel no(s) 11S44E290000, 11S44E290600, 11S44E291200, 11S44E283000, 11S44E283600 Total number of acres irrigated 388.4

10. In which county(ies) are lands listed above as place of use located? Bear Lake

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.

12. Describe any other water rights used at the same place and for the same purposes as described above.

A companion enlargement right; Overlapped and co-mingled with Three Mile Creek Irrigation Co or None (☐)

13. Remarks (Include an explanation of the priority date selected):

Priority date is per license. This right was most recently transferred to this place of use in 2015, but the final approval wasn't issued until 2018. Historical use of this right previous to the transfer application was reviewed by IDWR and confirmed prior to approval of the transfer.

Since the approval of the transfer and the connection of the well to the existing pipeline for the pivots on the property, an enlargement has occurred in which the ground water is also delivered to the two adjacent pivots during times when the surface water has not been available. An associated claim has been prepared to reflect the enlargement. This right is claimed as a portion of a permissible place of use shared with an enlargement claim of 259.4 acres, but is anticipated to be limited to the irrigation of 129 acres.

Name of claimant(s) Bryce W. Crane

Claim ID _____

Claim Map

Based on WR Number: 11-7047

Claimant: Bryce W. Crane

Claim No: _____



990 495 0 990 Feet



Date Created: 10/9/2023

- POD
- Pivot Mainlines
- POU of 11-7047 & Enlargement
- Twp & Rng
- PLSS Sections
- QQ
- Base Map: USDA NAIP 2021



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 11-7047

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: _____

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: 10-16-23

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) Bryce W. Crane

Claim ID _____