

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: 13-7137

Date Received: 4/4/2024

Receipt No: P000785

Claim Fee: \$25.00

Received By: MB

RECEIVED

APR 04 2024

IDWR/Preston

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s)

CHRIS & ANNA TRIPP FAMILY TRUST
PO BOX 7
DAYTON ID 83232

Phone: (208) 705-8437

2. Date of Priority: 9/28/1976

3. Source:
SPRING

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
15S	38E	10	SW NE		FRANKLIN	

5. Description of diverting works:

Cement box that collects the water and it is piped to troughs and hydrants to fill the troughs.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
STOCKWATER	1/01	12/31	0.02		2

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or 2 A.F.A.

8. Non-irrigation uses:

100 head of cattle

9. Place of use:

STOCKWATER within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
15S	38E	10	SW		NE		
15S	38E	10	SE		NE		

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:

12. Remarks:

Priority Date Explanation:

This is the date of the original water license.

P/D & P/U LOCATED ON CENTER LINE OF S1/2NE1/4, S10, T15S, R38E.

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

_____ Trustee _____	of _____ The Chris & Anna Tripp Family Trust _____
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 Chris Tripp Trustee Date 4/4/2024

Printed Name of Authorized Agent Chris Tripp