

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: 13-4059B
Date Received: 7/1/2024
Receipt No: P000976
Claim Fee: \$25.00
Received By: MB

RECEIVED

JUL 01 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)

GUY WILSON ROBBINS II
299 RIVER RD
GRACE ID 83241

Phone: (208) 221-8160

OR

NIKCOLE ROBBINS
299 RIVER RD
GRACE ID 83241

Phone: (208) 221-6556

2. Date of Priority: 5/1/1954

3. Source:

SPRING SINKS

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
11S	40E	22	NW SW		CARIBOU	

5. Description of diverting works:

From the spring water is collected by perforated pipe to a cement cistern about 1000 gallons. From there water is pipe through a 4" pipe by gravity to house.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	1/01	12/31	0.04		

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

1 house, lawn and garden, 1 barn.

9. Place of use:

DOMESTIC within CARIBOU County

Township	Range	Section	¼	of	¼	Lot	Acres
11S	40E	22	NE		NW		

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 when the spring was developed and first used and use continues today. This is a third of a shared spring for domestic use from the statutory claim 13-4059.

13. Basis of Claim: Statutory Claim

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 X 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): Craig Wilson Roblin II Date: 7-1-2024

Date: _____