

**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: 13-4217
Date Received: 7/9/2024
Receipt No: P001015
Claim Fee: \$58.00
Received By: mrs

RECEIVED

JUL 09 2024

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

IDWR/Preston

1. Name of Claimant(s)

KENT S BEARDALL
4143 E RIVERDALE RD
PRESTON ID 83263

Phone: (208) 339-0642

OR

TAMMY BEARDALL
4143 E RIVERDALE RD
PRESTON ID 83263

Phone: (208) 339-5821

2. Date of Priority: 4/1/1925

3. Source:
MINK CREEK

Trib. to:
BEAR RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
14S	40E	22	SW NW		FRANKLIN	

5. Description of diverting works:

Cement and tarp dam with boards and head gate, then ditched to property.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	10/31	0.14		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
14S	40E	22	SW		NW		5.8
14S	40E	22	NW		SW		1.7

Total Acres = 7.5

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 priority date given on the statutory claim. To the best of my knowledge, this date is correct, and this water use has continued to this day through various property owners. The irrigated acreage place of use is claimed as it has always been.

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 _____ 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): Kent A Beardsall Date: 7-9-24

Claim 13-4217



- POD ●
- Ditch —
- POU —

