

**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: 13-7457
Date Received: 8/21/2024
Receipt No: P001204
Claim Fee: \$54.00
Received By: CG

RECEIVED

AUG 21 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)

JIM & JOY DOUGHERTY TRUST
2086 N DEER CLIFF RD
PRESTON ID 83263

Phone: (208) 852-3763

2. Date of Priority: 12/2/1988

3. Source:

SPRING CUB RIVER

Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
15S	41E	7	NE SE		FRANKLIN	

5. Description of diverting works:

Spring gravity fed 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		1.2
STOCKWATER	1/01	12/31	0.01		0.1

7. Total Quantity Appropriated is:

0.04 C.F.S. and/or 1.3 A.F.A.

8. Non-irrigation uses:

4 horses
1 house, 1 shop and lawn and garden.

9. Place of use:

DOMESTIC within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
15S	41E	7	NE		SE		

STOCKWATER within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
15S	41E	7	NE		SE		

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 licensed priority date and use continues today.

Use of water under this water right will be regulated by the watermaster of State Water District No. & DISTRICT.

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 __X__ 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 Jim & Joy Living 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 Joy Dougherty Date 8/21/24
Printed Name of Authorized Agent Joy Dougherty