

**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: 13-4079
Date Received: 9/11/2024
Receipt No: P001279
Claim Fee: \$25.00
Received By: CG

RECEIVED

SEP 11 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)

JAMES R & KAREN S NAYLOR FAMILY TRUST
58 S 3200 W
WESTON ID 83286

Phone: (208) 852-2087

2. Date of Priority: 3/16/1920

3. Source:

SPRINGS SINKS
SPRINGS SINKS

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
15S	39E	30	SW SW	4	FRANKLIN	Beginning
15S	39E	30	NW NW	1	FRANKLIN	Ending

5. Description of diverting works:

In stream stock water from multiple springs.

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		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

100 head of cattle. 150 Sheep. 30 Horses.

9. Place of use:

STOCKWATER within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
15S	39E	19	SW		SW		
15S	39E	30	NW		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:

None.

12. Remarks:

Priority Date Explanation:

This is the date of the statutory claim. Nothing has changed since that time.

NWNE, NWNW, S 30, T 15S, R 39E INCLUDES SEVERAL POINTS STOCKWATER OF 70 DAIRY CATTLE

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 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 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 Karen Naylor Date 9-11-24

Printed Name of Authorized Agent Karen Naylor