

OK Stamp GPS

Form No. 42-1409-2 (Internet 01/23)

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

Claim ID: 13-7122

Date Received: 9/12/24

Receipt No: P001282

Claim Fee: \$52 By: MB

RECEIVED

SEP 12 2024

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

IDWR/Preston

Please type or print clearly

1. Name of claimant(s) PAUL OR TERRIE MCKAY Phone (208) 251-6125
Mailing address 4598 E. STANLEY CREEK RD PRESTON ID Zip 83263
Street or Box City State
Email address (optional) UP THE CREEK. PAUL @ GMAIL.COM

2. Date of priority: (Only one per claim) 11-20-1973 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (X) SPRINGS
which is tributary to (b) MINK CREEK

4. Location of point of diversion is: Township 14S, Range 40E, Section 23,
SE 1/4 of NW 1/4, or Govt. Lot _____ BM, County of FRANKLIN;
Parcel no. RPO 1327.00

Additional points of diversion, if any: _____

If available, GPS coordinates: 42.19310 111.75091

5. Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

UNDERGROUND COLLECTION SYSTEM TO 1000 GAL STORAGE TANK
1780' DISTRIBUTION PIPE TO HOME

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For DOMESTIC purposes from 01/01 to 12/31 amount .02 cfs (X) or AFY (X) 1.2 AF

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .02 cfs (X) or AFY (X) 1.2 AF

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)

DOMESTIC 1 HOME

9. Location of place of use is: Township 145, Range 40E, Section 23,
NE 1/4 of NW 1/4, Govt. Lot _____ BM, Parcel no. 1327.00
If different than shown in Item 4
for (check one) Domestic (☒) Stock () Domestic and Stock ()

Additional places of use, if any _____

10. In which county(ies) are lands listed above as place of use located? FRANKLIN

11. Do you own the property listed above as place of use? Yes (☒) No ()
If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
THIS SPRING IS USED FOR YARD WATER, WELL IS USED FOR CULINARY USE IN HOME or None ()

13. Remarks (include an explanation of the priority date selected):
11/20/1973 IS ORIGINAL FILING DATE ON THIS WATER

14. Basis of claim (check one) Beneficial Use (☒) Posted Notice () License (☒) Permit () Decree ()
Court _____ Decree Date _____ Plaintiff v. Defendant _____
If applicable provide IDWR Water Right Number 13-7122

15. **Signature(s)**

- (a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Bear River Basin Water System 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) [Signature] Date: 4-30-2024

Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Agent's title (Please print) _____ of _____
Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. **Notice of Appearance:**

Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____

ArcGIS Web Map



5/6/2024, 1:42:18 PM

Quarter Quarters ☐ Townships

☐ PLS Sections

Cubie 13-7/22

