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IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION OF RIGHTS TO THE USE OF WATER
FROM THE BEAR RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 79576

Ident. Number 13-7349

Date Received: 9/11/2024

Receipt No:

PC01433

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
ERNEST DEAN	2020 S 1600 W	COLLEGE WARD	UT	USA	84339

2. Date of Priority:

Date	Explanation
9/4/1981	

3. Source:

Source	Tributary
GROUND WATER	

4. Point of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County	Type	Description
14S	38E	26		NE	SE	FRANKLIN		

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
IRRIGATION			

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
IRRIGATION	4/01	10/15

7. Quantity:

Water Use	CFS	AF	KW
IRRIGATION	2.36	413.00	

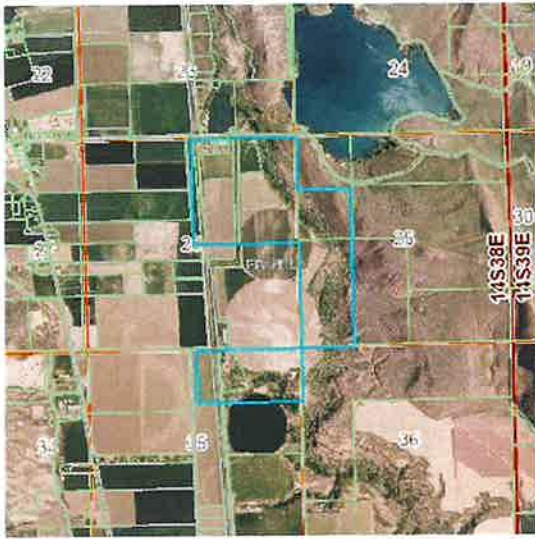
Totals

CFS	AF	KW
2.36	413.00	

8. Place of Use:

Water Use	Total Claimed Acreage
IRRIGATION	118.00

IRRIGATION								
Township	Range	Section	QQ	Q	County	Govt Lot	Acres	
14S	38E	25	SW	NW	FRANKLIN		8.00	
14S	38E	25	NW	SW	FRANKLIN		21.00	
14S	38E	25	SW	SW	FRANKLIN		15.00	
14S	38E	26	NE	NE	FRANKLIN		17.00	
14S	38E	26	NW	NE	FRANKLIN		1.00	
14S	38E	26	SW	NE	FRANKLIN		4.00	
14S	38E	26	SE	NE	FRANKLIN		38.00	
14S	38E	35	NE	NE	FRANKLIN		10.00	
14S	38E	35	NW	NE	FRANKLIN		4.00	



9. **Remarks:**

10. **Other Water Rights:**

Twin Lakes

11. **Basis:**

Basis
License

12. **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 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): Ernest H. Dean Date: 10/16/24

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____
Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please print name

