

**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: 13-2269

Date Received: 10/22/24

Receipt No: 7001473

Claim Fee: 310.00 By: MB

RECEIVED

OCT 22 2024

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

IDWR/Preston

Please type or print clearly

1. Name of claimant(s) Bart Christensen and Cherie Christensen Trust Phone (208) 547-7787
Mailing address 1364 Anderson Road. Grace, Idaho Zip 83241
Street or Box City State
Email address (optional) ryanchri11@me.com
2. Date of priority: (Only one per claim) 12/09/1965 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
3. Source of water supply (Check one) Ground Water (✓) or Other () (a) _____
which is tributary to (b) _____
4. a. Location of point of diversion is: Township 09S, Range 40E, Section 23,
SE 1/4 of SW 1/4, Govt. Lot _____, BM, County of _____
Parcel no. _____
Additional points of diversion, if any: _____
If available, GPS Coordinates 42.623708, -111.751318
b. If instream flow, beginning point of claimed instream flow is:
Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
Ending point is: Township _____, Range _____, Section _____, _____ 1/4 of _____ 1/4,
Govt. Lot _____, BM, County of _____
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, 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.
THIS IS AN IRRIGATION WELL. IT IS A ²⁴⁰⁰2400 GAL/MIN PUMP WITH A 200HP MOTOR. IT IS DRILLED TO
355' WITH STATIC WATER LEVEL AT 275'. IT HAS 10" MAINLINE THAT GOES TO 2 IRRIGATION PIVOTS.
THE 200 HP MOTOR IS CONTROLLED BY A VARIABLE FREQUENCY DRIVE.

6. Water is claimed for the following purposes:

(dates are inclusive MM-DD) (cfs) (acre-feet)

For IRRIGATION purposes from 04/01 to 11/01 amount 4.42 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 4.42 (cfs) and/or (b) _____ (acre-feet)

8. Non-irrigation uses; describe fully (e.g., Domestic: Give number of households served; Stockwater: Type and number of livestock, etc.) _____

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
09S	40E	23									32.5	32.5	32.5	32.5					130
09s	40e	23													32.5	32.5	32.5	32.5	130

Parcel no(s) _____ Total number of acres irrigated 260

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

11. Do you own the property listed above as place of use? Yes (✓) No ()
If your 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.
_____ or None (✓)

13. Remarks (Include an explanation of the priority date selected):

The well was drilled in 1965 by Reed Christensen. Bart and Cherie Christensen purchased the land. In 2018, BKR Farms purchased the land from Eric Simonson on the east side of this lot. Water was transferred from another location to this location in order to water the new ground now owned by BKR Farms. Bart and Cherie Christensen are a owner in BKR Farms LLC.

Name of claimant(s) _____ Claim ID _____

Scale: 2 inches equals 1 mile

The image displays a 16x16 grid of squares, each containing a crosshair pattern. The grid is divided into four 8x8 quadrants by a central vertical and horizontal line. The top-left and bottom-right quadrants have a light gray background, while the top-right and bottom-left quadrants have a light blue background. Each square in the grid contains a crosshair pattern consisting of a central square with four lines extending to the midpoints of its sides, forming a cross shape. The lines are thin and black, and the central square is slightly larger than the four surrounding squares.

Name of claimant(s) _____ Claim ID _____

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 13-02269

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: 1

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) Bart W. Elvestad Date: 10/17/2024

Cherie Christensen Date: 10-17-2024

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

_____ of _____
Agent's 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 _____ Date _____

Printed Name of Authorized Agent _____

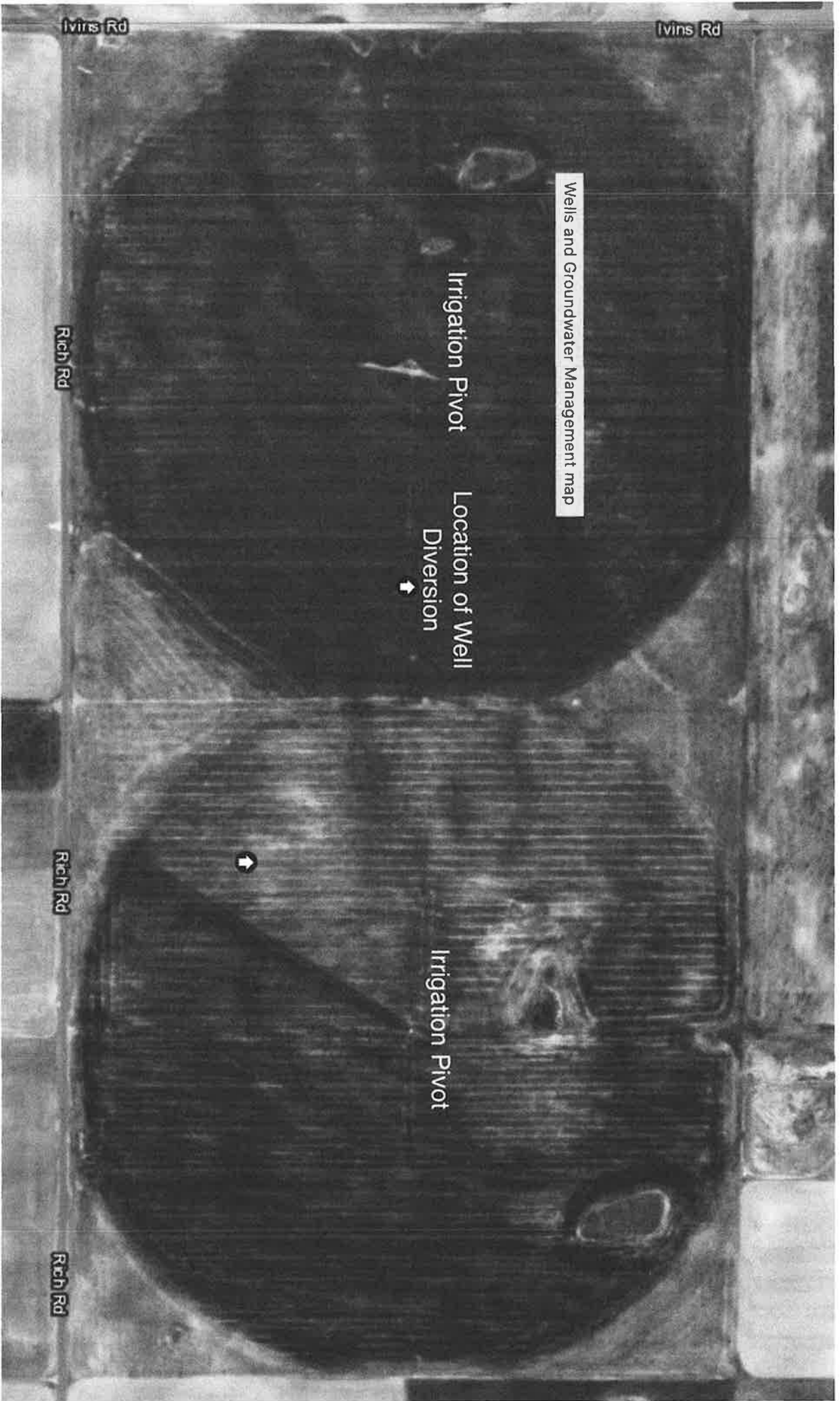
16. **Notice of Appearance:**

Notice is hereby given that I, (please print) _____, will be acting as attorney at law on behalf of 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 _____



Ivins Rd

Ivins Rd

Wells and Groundwater Management map

Irrigation Pivot

Location of Well
Diversion
↓

Rich Rd

Rich Rd

Irrigation Pivot

Rich Rd