

**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

RECEIVED

JUL 24 2023

IDWR/Preston

Ident. Number: 15-7292
Date Received: 7/24/2023
Receipt No: P000397
Claim Fee: \$55
Received By: JW

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

1. Name of Claimant(s)

KAREN J OWENS
PO BOX 368
INKOM ID 83245

Phone: (208) 775-3495

OR

DELBERT V OWENS
PO BOX 368
INKOM ID 83245-0368

Phone: (208) 339-4106

2. Date of Priority: 7/2/2007

3. Source:
GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
12S	34E	14	NE SW		ONEIDA	

5. Description of diverting works:

well and sprinkler pipe.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	10/31	0.1		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within ONEIDA County

Township	Range	Section	¼	of	¼	Lot	Acres
12S	34E	14	NE		SW		5

Total Acres = 5

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 is the date given with the license.

This right when combined with all other rights shall provide no more than 0.03 cfs per acre nor more than 3.5 afa per acre at the field headgate for irrigation of the place of use.

After specific notification by the Department, the right holder shall install a suitable measuring device or shall enter into an agreement with the Department to use power records to determine the amount of water diverted and shall annually report the information to the Department.

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 _____ 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): Karen Owens Date: 7-24-23
Robert Owens Date: 7-24-2023

Claim 15-7292



0 0.0175 0.035 0.07 Miles

Legend

-  Claim POD
-  Claim POU