

**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: 11-7633
Date Received: 9/7/2023
Receipt No: PA00414
Claim Fee: \$52
Received By: MB

RECEIVED

SEP 07 2023

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)

MARK SMITH PARKER
4159 LANARK RD
LIBERTY ID 83254

Phone: (208) 317-6292

AND/OR

MELONY PARKER
4159 LANARK RD
OVID ID 83254

Phone: (208) 317-6296

2. Date of Priority: 3/3/2009

3. Source:
SPRINGS SINKS

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
13S	43E	7	NE NE		BEAR LAKE	

5. Description of diverting works:

Cattle drink directly from the spring. I've claimed this how its been used since I bought the property. To my knowledge nothing was changed since it was licensed.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
STOCKWATER	01/01	12/31	0.02		1.3

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or 1.3 A.F.A.

8. Non-irrigation uses:

100 head of cattle.

9. Place of use:

STOCKWATER within BEAR LAKE County

Township	Range	Section	¼	of	¼	Lot	Acres
13S	43E	7	NE		NE		

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 authorizes the watering of livestock directly from the spring source without a diversion.

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): Mark Cook Date: 9-7-23

Date: _____