

**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: 11-4102
Date Received: 4/27/2023
Receipt No: 2116129
Claim Fee: 2500
Received By: LH

RECEIVED
APR 27 2023
DEPARTMENT OF
WATER RESOURCES

**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)

RON TEICHERT
PO BOX 147
COKEVILLE WY 83114

Phone: (307) 248-3432

2. Date of Priority: 10/1/1939

3. Source:
MUD SPRING

Trib. to:
SINKS

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
16S	45E	28	SW NW		BEAR LAKE	

5. Description of diverting works:

Barrel used to collect spring water and piped to troughs.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	4/01	12/31	0.05		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

9. Place of use:

STOCKWATER within BEAR LAKE County

Township	Range	Section	¼	of	¼	Lot	Acres
16S	45E	28	SW		NW		

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:

13. Basis of Claim: Statutory Claim

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 X 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): Donald H. Trickett Date: 4-27-23

_____ Date: _____