

**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

MAK 17 2023

IDWR/Preston

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

Ident. Number: 11-2105
Date Received: 3/17/2023
Receipt No: P000061
Claim Fee: \$130.00
Received By: CH

1. Name of Claimant(s)

SHARON BUTTERFIELD
PO BOX 444
SODA SPRINGS ID 83276

Phone: (208) 574-2225

2. Date of Priority: 9/19/1952

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	$\frac{1}{4}$ of $\frac{1}{4}$ of $\frac{1}{4}$	Lot	County	Type
08S	41E	12	NW NE		CARIBOU	

5. Description of diverting works:

well supplying a sprinkler irrigation system on hay ground.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
IRRIGATION	04/15	10/31	1.6		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

9. Place of use:

IRRIGATION within CARIBOU County

Township	Range	Section	¼	of	¼	Lot	Acres
08S	41E	12	NW		NE		40
08S	41E	12	SW		NE		39
08S	41E	12	NE		NW		0.5
08S	41E	12	SE		NW		0.8

Total Acres = 80.3

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:

11-2110

12. Remarks:

Priority Date Explanation:

This is the date given on the license. This is a shared license with Chad Bybee. We want to split the claim and claim our part of the license.

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.

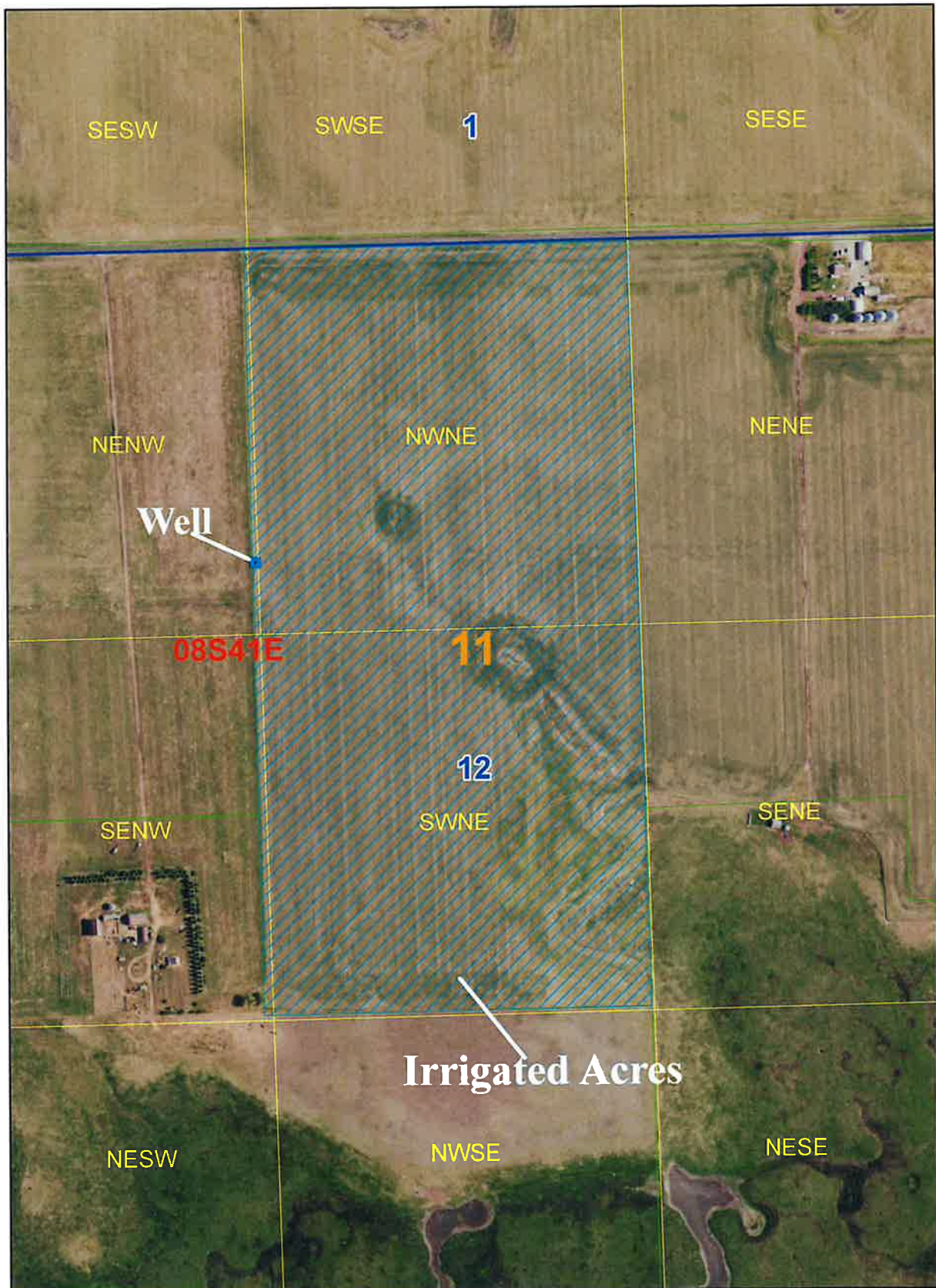
Signature of Claimant(s):

Sharon Lutterfield

Date: 3-17-2023

Date: _____

Claim 11-2105



0 0.05 0.1 0.2 Miles