

**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: 11-4337
Date Received: 2/9/2023
Receipt No: P000012
Claim Fee: \$25.00
Received By: MB

RECEIVED

FEB 09 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)

MARTIN MAST TRUSTEE
1600 HUNTER HILL RD
MONTPELIER ID 83254

Phone:

2. Date of Priority: 6/1/1891

3. Source:

SPRING

Trib. to:

SINKS

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
14S	45E	6	NW NE	2	BEAR LAKE	

5. Description of diverting works:

SPRING THAT FLOWS INTO PIPE AND SUPPLIES HOME, EXCESS FLOWS ON PROPERTY TO FEED THE STOCKWATER.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	1/01	12/31	0.02		
STOCKWATER	1/01	12/31	0.05		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

ABOUT 150 HEAD OF CATTLE AND HORSES
DOMESTIC FOR ONE HOME

9. Place of use:

DOMESTIC within BEAR LAKE County

Township	Range	Section	¼	of	¼	Lot	Acres
14S	45E	6	NW		NE	2	
14S	45E	6	SW		NE		

STOCKWATER within BEAR LAKE County

Township	Range	Section	¼	of	¼	Lot	Acres
14S	45E	6	NW		NE	2	
14S	45E	6	SW		NE		
14S	45E	6	NE		NW	3	
14S	45E	6	SE		NW		

10. Do you own the property listed above as place of use? Yes

11. Other Water Rights Used:

12. Remarks: Priority Date Explanation:

13. Basis of Claim: Beneficial Use

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 Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

Trustee of Martin Mast Trustee
Agents 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 Martin Mast Date 2-9-23

Printed Name of Authorized Agent Martin Mast Family Trustee