

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: 11-1092
Date Received: 10/3/2023
Receipt No: 2000467
Claim Fee: \$150.00
Received By: MB

RECEIVED

OCT 03 2023

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

ICWR/Preston

1. Name of Claimant(s)

CITY OF ST CHARLES
C/O CITY CLERK
PO BOX 58
SAINT CHARLES ID 83272-0058

Phone: (208) 945-9636

2. Date of Priority: 3/11/1893

3. Source:
SPRING

Trib. to:
ST CHARLES CREEK

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
15S	43E	19	NE NE		BEAR LAKE	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
MUNICIPAL	1/01	12/31	1		

7. Total Quantity Appropriated is:

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

8. Non-irrigation uses:

9. Place of use:

MUNICIPAL within BEAR LAKE County

Township	Range	Section	¼	of	¼	Lot	Acres
15S	43E	11	NW		SE		
15S	43E	11	SW		SE		
15S	43E	13	SW		NW		
15S	43E	13	NW		SW		
15S	43E	13	SW		SW		
15S	43E	14	NE		NE		
15S	43E	14	NW		NE		
15S	43E	14	SE		NE		
15S	43E	14	SW		NE		
15S	43E	14	NE		SE		
15S	43E	14	NW		SE		
15S	43E	14	SE		SE		
15S	43E	14	SW		SE		
15S	43E	14	NE		SW		
15S	43E	14	SE		SW		
15S	43E	23	NE		NE		
15S	43E	23	NW		NE		
15S	43E	23	SE		NE		
15S	43E	23	SW		NE		
15S	43E	23	NE		NW		
15S	43E	23	SE		NW		
15S	43E	23	NE		SE		
15S	43E	23	NW		SE		
15S	43E	23	SE		SE		
15S	43E	24	NW		NW		
15S	43E	24	SW		NW		
15S	43E	24	NW		SW		
15S	43E	26	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:

13. Basis of Claim: Decreed

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 Organizations:

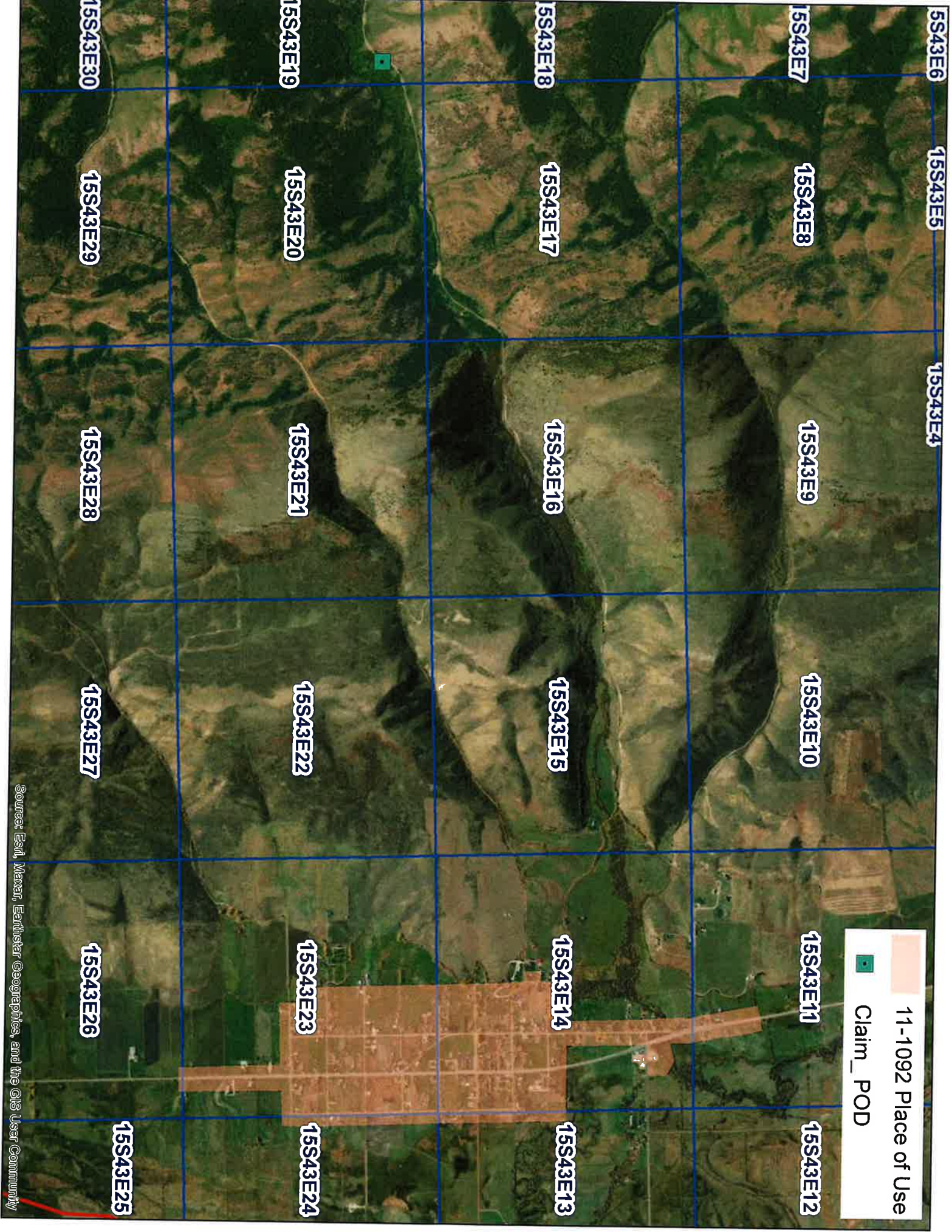
I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

Water Master of St. Charles City
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 Kit Andersen Date 10/03/2023

Printed Name of Authorized Agent Kit Andersen



15S43E6

15S43E5

15S43E4

15S43E7

15S43E8

15S43E9

15S43E10

15S43E11

15S43E12

15S43E18

15S43E17

15S43E16

15S43E15

15S43E14

15S43E13

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15S43E20

15S43E21

15S43E22

15S43E23

15S43E24

15S43E30

15S43E29

15S43E28

15S43E27

15S43E26

15S43E25

11-1092 Place of Use

Claim_POB