

**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: 13-7504
Date Received: 2/18/2025
Receipt No: P001892
Claim Fee: \$25.00
Received By: mg

RECEIVED

FEB 21 2025

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)

OAKDELL FARMS LLC
241 ST ANDREWS WAY
SIOUX CENTER IA 51250-2957

Phone:

2. Date of Priority: 1/21/1993

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
16S	40E	15	SW NW		FRANKLIN	

5. Description of diverting works:

Water is pumped to storage tank and gravity fed to place of use.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
STOCKWATER	1/01	12/31	0.23		14.6

7. Total Quantity Appropriated is:

0.23 C.F.S. and/or 14.6 A.F.A.

8. Non-irrigation uses:

500,000 chickens

9. Place of use:

STOCKWATER within FRANKLIN County

Township	Range	Section	¼	of	¼	Lot	Acres
16S	40E	15	SW		NW		
16S	40E	15	NW		SW		
16S	40E	16	NE		SE		

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:

13-4317

12. Remarks:

Priority Date Explanation:

This is the licensed priority date and use continues today.

The maximum diversion authorized under this right shall not exceed 13,000 gallons per day.

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 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

____ Divisional Food Safety Manager – Mountain Region_ of ____ OAKDELL FARMS LLC _____,
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 Kevin Blanch Date 2/18/25

Printed Name of Authorized Agent Kevin Blanch