

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            11-1102  
Date Received:           5/6/2025  
Receipt No:               E050859

1. Name of Claimant(s):

| Name         | Address    | City        | State | Country | Postal Code |
|--------------|------------|-------------|-------|---------|-------------|
| EPHRAIM HOGE | PO BOX 284 | BLOOMINGTON | ID    |         | 83223-0284  |
| TIFFANY HOGE | PO BOX 284 | BLOOMINGTON | ID    |         | 83223-0284  |

2. Date of Priority:

| Date     | Explanation                                                                                                                                                                                                                                                                                            |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6/1/1945 | This Water Right was originally part of a bigger area of land all belonging to Richard Loveland. That land has been sold in smaller pieces since and this is just a small portion of the original water right that goes with this piece of land. It was separated from the larger water right in 1982. |

3. Source:

| Source     | Tributary       |
|------------|-----------------|
| BEAR RIVER | GREAT SALT LAKE |

4. Point of Diversion:

| Township | Range | Section | Gov Lot | QQ | Q  | County    | Type | Description |
|----------|-------|---------|---------|----|----|-----------|------|-------------|
| 13S      | 44E   | 7       |         | NE | NE | BEAR LAKE |      |             |

5. Water is used for the following purpose(s):

| Water Use  | Number Of Homes | Stock | Description |
|------------|-----------------|-------|-------------|
| IRRIGATION |                 |       | irrigation  |

6. Season(s) of Use:

| Water Use  | From Month/Day | To Month/Day |
|------------|----------------|--------------|
| IRRIGATION | 04/15          | 09/15        |

7. Quantity:

| Water Use  | CFS  | AF | KW |
|------------|------|----|----|
| IRRIGATION | 0.32 |    |    |

Totals

| CFS  | AF | KW |
|------|----|----|
| 0.32 |    |    |

8. Place of Use:

| Water Use  | Total Claimed Acreage |
|------------|-----------------------|
| IRRIGATION | 12.50                 |

| IRRIGATION |       |         |    |    |           |          |       |
|------------|-------|---------|----|----|-----------|----------|-------|
| Township   | Range | Section | QQ | Q  | County    | Govt Lot | Acres |
| 13S        | 44E   | 7       | NE | SE | BEAR LAKE |          | 0.70  |
| 13S        | 44E   | 8       | SW | NW | BEAR LAKE |          | 4.30  |
| 13S        | 44E   | 7       | SE | NE | BEAR LAKE |          | 7.10  |
| 13S        | 44E   | 8       | NW | SW | BEAR LAKE |          | 0.40  |



9. **Remarks:**

10. **Other Water Rights:**

none

11. **Basis:**

| Basis   |
|---------|
| Decreed |

12. **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 Water System 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): \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

\_\_\_\_\_ of \_\_\_\_\_,  
Title Organization

that I have signed the foregoing document in the space below as

\_\_\_\_\_ of \_\_\_\_\_,  
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

Title and Organization \_\_\_\_\_

Please print name