

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 SNAKE RIVER BASIN WATER SYSTEM.

CIVIL CASE NUMBER: 39576

Ident. Number: A25-07014

Date Received: 7/19/1989

Receipt No: EOC 9951/90

Received By: ERC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Department of Water Resources
Eastern District Office

1. Name: CITY OF IONA
Address: P.O. BOX 400
IONA, ID

208-523-5600

83427

2. Date of Priority: OCT 26, 1971

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
02N	39E	5	SW	SW			BONNEVILLE

5. Description of diverting works:

WELL, 365' DEEP, 100 HP. MOTOR, MUNICIPAL DISTRIBUTION SYSTEM.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
MUNICIPAL	01/01	12/31	3.000		

7. Total Quantity Appropriated is:

3.000 C.F.S. (and/or)

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:

M/ MUNICIPAL USE WITHIN THE CITY OF IONA.

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
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11. Place of use in counties:

12. Do you own the property listed above as place of use? NO

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Date: 07/19/89

MICROFILMED
NOV 10 1992

13. Other Water Rights Used:
A25-04091/04092.

14. Remarks:
P/U WITHIN THE CITY LIMITS OF IONA.

15. Basis of Claim: LICENSE

16. 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 Snake 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: 1

For Organizations:

I do solemnly swear or affirm that I am Mayer of _____ Title

City of Iona Organization, that I have signed the foregoing document in the space below as _____ Title of

City of Iona Organization and that the statements contained in the foregoing document are true and correct.

Loren B. Hansen
Signature of Authorized Agent

Mayer City of Iona
Title (and) Organization

7 19 89

Date

State of Idaho)
County of Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 19 day

of July 19 89

Ernest Carlson
Notary Public

Seal

Residing at Idaho Falls, ID

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My Commission Expires 6-14-1994
2 Date: 07/19/89

MICROFILMED
NOV 10 1992

RGE

RGE 39C

Top 3N

Top 2N

A25-006-11
A25-006-12
Well

A25-07014
Well

5

NOV 1960
P.O. BOX 1111
SALT LAKE CITY, UT 84111