

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: A29-11850
Date Received: 9/26/1990
Receipt No: E013884
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: THERON W. FOSTER 208-775-4972
Address: P.O. BOX 309
INKOM, ID 83245

AND/OR

Name: MYRNA K. FOSTER 208-775-4972
Address: P.O. BOX 309
INKOM, ID 83245

2. Date of Priority: SEP 30, 1975

3. Source: RAPID CREEK Trib. to: PORTNEUF RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	36E	22	SE	SE	NW		BANNOCK

5. Description of diverting works:
1 HP PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		
STOCKWATER	01/01	12/31	0.020		

7. Total Quantity Appropriated is:
0.060 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
DOMESTIC, 1 HOUSEHOLD; STOCKWATER, 2 HORSES, 2 COWS

A2911850



10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	36E	22	SE	NW		DOMEST	
			SE	NW		STOCK	

11. Place of use in counties: BANNOCK

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

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: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

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

Notary Public

Seal

Residing at _____

My Commission Expires _____

4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME FOSTERCLAIM IDENT. NO. A29-11850

DATE RECEIVED _____

CK # _____

AMOUNT \$ _____

- | | YES | NO | Requires Info: |
|--|-------------------------------------|--------------------------|----------------|
| 1. Is the name and address complete with zip code? | ☒ | ☐ | * |
| 2. Is a priority date entered? | ☐ | ☐ | * |
| Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. | ☐ | ☐ | * |
| 3. (a) Is a source entered? | ☐ | ☐ | * |
| (b) Is a tributary to entered? (if required) N/A | ☐ | ☐ | * |
| 4. Is the legal description of the p.d. sufficient? | ☐ | ☐ | * |
| 5. Is there a description of the diverting works? | ☐ | ☐ | * |
| 6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. | ☐ | ☐ | * |
| Is the period of use included? | ☐ | ☐ | * |
| Is a quantity claimed for each use? | ☐ | ☐ | * |
| 7. Is a total quantity claimed entered? | ☐ | ☐ | * |
| 8. If required is a consumptive use entered? N/A | ☐ | ☐ | * |
| Is the consumptive use correct? N/A | ☐ | ☐ | * |
| 9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. N/A | ☐ | ☐ | * |
| 10. Is (are) the place(s) of use and purpose(s) indicated? | ☐ | ☐ | * |
| 11. Is (are) the county(ies) entered? | ☐ | ☐ | * |
| 12. Is the ownership of p.u. checked? | ☐ | ☐ | * |
| 13. Are other water rights listed or "none" indicated? | ☐ | ☐ | * |
| 14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) N/A | ☐ | ☐ | * |
| 15. Is the basis of the claim indicated? | ☐ | ☐ | * |
| 16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) N/A | ☐ | ☐ | * |
| 17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. | ☐ | ☐ | * |
| 18. Has the claim been signed, sealed, and dated by a notary? | ☐ | ☐ | * |
| 19. Was this claim filed on time, or was an extension granted? | ☐ | ☐ | * |
| 20. Is the fee enclosed correct? Exempt | ☐ | ☐ | * |
| 21. If this claim is based on an existing water right, has the identification number been entered? N/A | ☐ | ☐ | * |
| 22. Should this claim be data entered? | ☐ | ☐ | * |

Claim checked by: JXDate: 7/31/90Claim must be returned to claimant: (Yes) / (No)Claimant must be notified of modifications: (Yes) / (No)Receipt Prepared by: JXClaim data entered by: JXSent to claimant by: JXDate: 7/26/90Date: 7/26/90Date: 7/26/90

Checked by: _____ Date: _____

Comments: _____

MICROFILMED

NOV 16 1992

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
Eastern District Office
900 N. Skyline Dr., Suite A
Idaho Falls, ID 83402-1718

RETURN SERVICE REQUESTED



29-11850 - Dom.



NOT DELIVERABLE
AS ADDRESSED
UNABLE TO FORWARD

FOSTER, THERON W
FOSTER, MYRNA K
PO BOX 309
INKOM ID 8



IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. A79-11850Date Received 4/30/90Receipt Number EC13884NOTICE 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.

Filing Fee \$25

RECEIVED

APR 30 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) MYRNA K. FOSTER
THERON W. FOSTER Phone (208) 775-4972Mailing Address P.O. Box 309 - INKON, IDAHO Zip 832452. Date of Priority (Only one per claim) 9.30.1975 Month/Day/Year3. Source of water supply (Check one) () Groundwater or Other ☒ (a) RAPID CREEK
which is tributary to (b) PORTNEUT RIVER Name or kind of source4. Location of point of diversion is: Township 7 SOUTH Range 36 E.B.M.
Section 22 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, BM.,
County of BANNOCK

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. 1 H.P. Pump

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

	Month/Day	Month/Day	(cfs)
For <u>DOMESTIC</u> purposes from <u>1-1</u> to <u>12-31</u> amount <u>0.04</u>			
(Both dates are inclusive)			
For <u>STOCK</u> purposes from <u>1-1</u> to <u>12-13</u> amount <u>0.02</u>			

7. Total quantity claimed 0.06 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) DOMESTIC: 1 HOUSEHOLD - STOCKWATER: 2 HORSES - 2 COWS

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NOV 16 1992

10. Place of use is: Township: 7th South Range 36
Section 22, SE 1/4 of NW 1/4, Govt. Lot _____, B.M.,

for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

11. In which county (ies) are lands listed above as place of use located? SANNOCK

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
X None or _____

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake 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 Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Sharon W. Foster Date 4-24-90

Myrna K. Foster Date 4-24-90

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)

County of _____)

SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this April day of 24 19 90

SEAL

Notary Public Sharon Evans

Residing at 717 North 500 West - Malad Idaho

My Commission Expires March 1992

Last Name Evans Ident No. _____

Copies: White-State, Yellow-Claimant

NOV 16 1992

OLD (D) NUMBER -

44-38861-200-775-4072

L 8 RW-RA
Thunder Canyon Est
Dir # 1

WATER RIGHT NUMBER - A29-11860

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - CONDITIONS OF APPROVAL - - - - -
NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - - + - - - - DECREE DEFENDANT - - - - + - - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 09/26/91 KLISPR

+ - - - - COMMENTS - - - - -
NO COMMENTS FOUND

+ - - - - ADJUDICATION RIGHTS DATES AND FLAG AREA - - - - -

COURT REPORT FILING	- 00/00/0000	FIELD INSPECTION MADE	- 00/00/0000	CIVIL CASE NUMBER	- 29576
OBJECTION FILED DATE	- 00/00/0000	FIELD INSPECTION FLAG	-	OLD CASE NUMBER	-
RESPONSE FILED DATE	- 00/00/0000	VERIFIED DATE	- 00/00/0000	OLD JUDICIAL DISTRICT	-
CLAIM RECEIVED DATE	- 04/30/1990	LAST AMENDED DATE	- 00/00/0000	TEMPORARY RIGHT	- P
PROOF DUE DATE	- 00/00/0000	PROOF MADE DATE	- 00/00/0000	WATER DISTRICT	-
LICENSED DATE	- 00/00/0000	RECEIPT NUMBER	- 2013884	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE LABEL FLAG	-	PLG OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
PRO EXEMPT FLAG	-	NAME CONNECTOR	- AND/OR	NOTICE OF ERROR FLAG	-

RATCE000800

DATA ENTRY
ENTERED 9.8.91
CHECKED 10.2.91

"Verified By"
Topo Map/Ortho-PQ
ASCS Map
Watermaster Records
NAPP Photos
Field Exam
Other (See Remarks)
County Records
Witness Statement
Project Records
IDWR Records

VERIFIED
NOV 24 1991

PROOF
OCT 03 1991

CERTIFIED
DEC 26 1991
WATER EXAMINER

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APR 14 1994