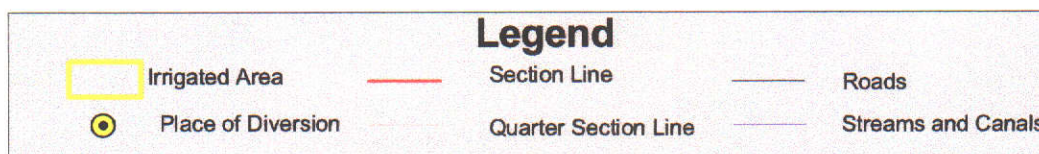
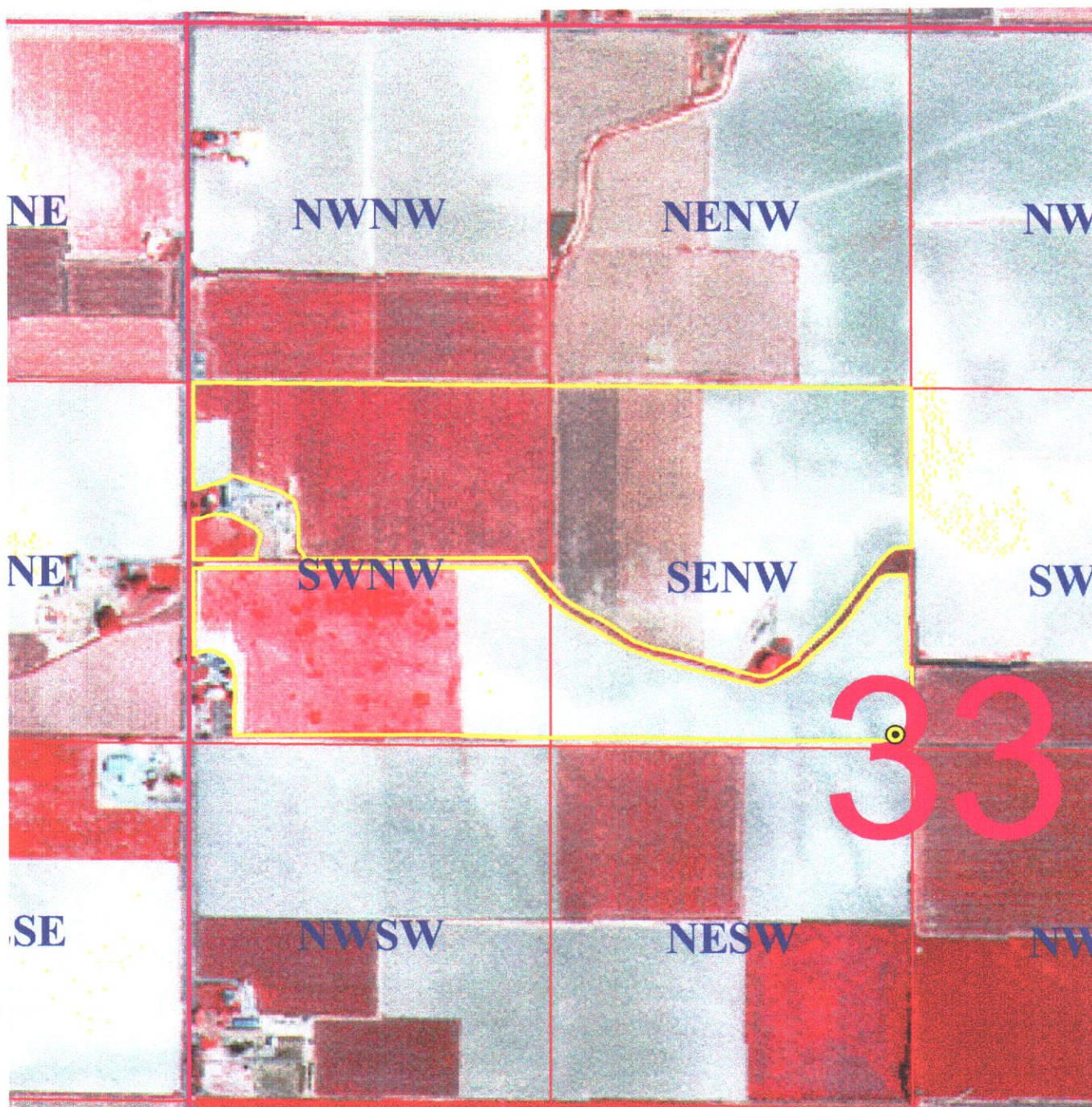


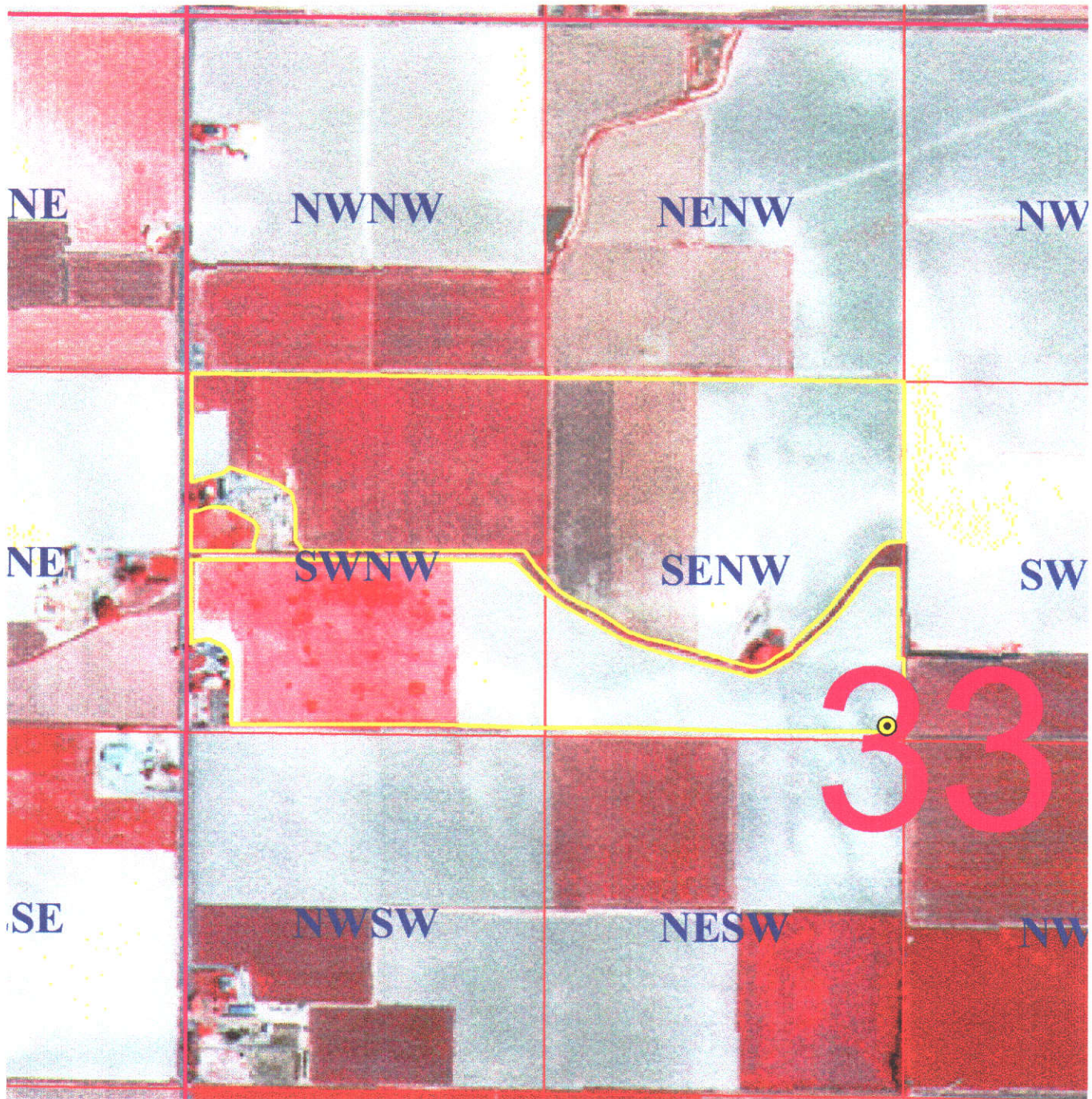
Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000



Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000

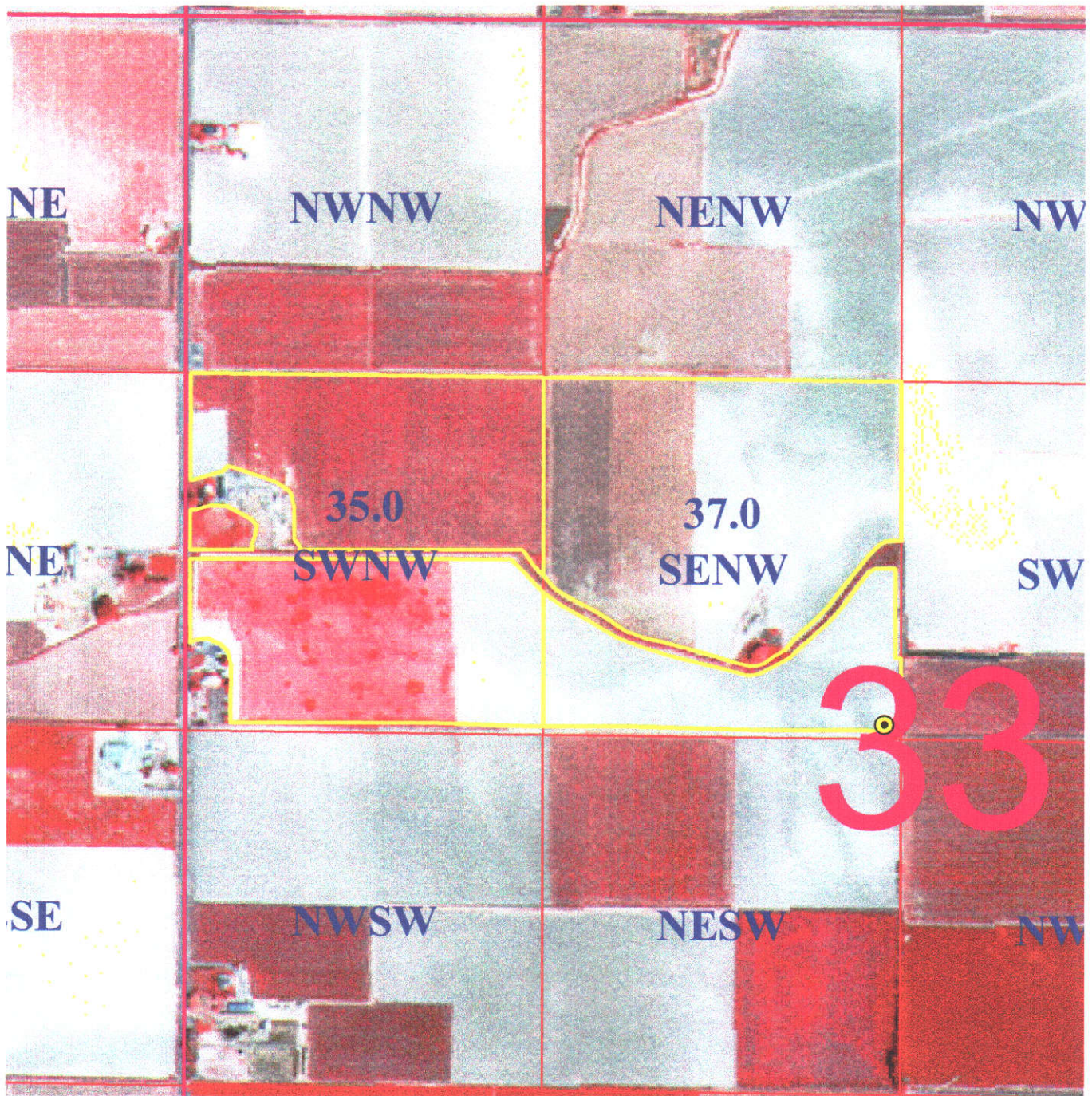


Legend		
	Irrigated Area	 Section Line
	Place of Diversion	 Quarter Section Line
		 Roads
		 Streams and Canals



Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000



Legend					
	Irrigated Area		Section Line		Roads
	Place of Diversion		Quarter Section Line		Streams and Canals

400 0 400 800 Feet



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: A47-12915
Date Received: 10/06/1988
Receipt No: C004342
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JACK SHROPSHIRE 208-423-5044
Address: RT. 2
KIMBERLY, ID 83341
AND/OR
Name: ERMA SHROPSHIRE 208-423-5044
Address: RT. 2
KIMBERLY, ID 83341
2. Date of Priority: MAR 01, 1935
3. Source: UNNAMED DRAIN Trib. to: SNAKE RIVER
4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	18E	33	SE	SE	NW		TWIN FALLS
5. Description of diverting works:
6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/15	11/15	0.600		
7. Total Quantity Appropriated is:
0.600 C.F.S. (and/or) A.F.A.
8. Total consumptive use is 90.0 Acre Feet Per Annum.
9. Non-irrigation uses:

10..Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	18E	33	SW	NW	IRR	15.0
			SE	NW	IRR	15.0
Section Acres						30.0
Total Acres						30.0

11. Place of use in counties: TWIN FALLS

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

13. Other Water Rights Used:
TWIN FALLS CANAL CO. WATER

14. Remarks:
THIS IS FOR WASTEWATER THAT RUNS THROUGH PROPERTY. I AM THE FIRST
USER OF THIS WASTEWATER.

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 _____

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

Date Received

Receipt Number

A47-12915

10-6-88

COO 4342

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) JACK AND/OR ERMA SHROPSHIRE Phone (208) 423-5044Mailing Address ROUTE 2, KIMBERLY, IDAHO Zip 833412. Date of Priority (Only one (1) per claim) 1935 March 23. Source of water supply (a) UNNAMED DRAIN
which is tributary to (b) SNAKE RIVER4. a. Location of existing point of diversion is: Township 33 Range 10S Section 18E,
SE 1/4 of SE 1/4 of NW 1/4, Govt. Lot, _____ B.M., County of TWIN FALLSAdditional points of diversion if any: NONE

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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.

THIS IS WASTE WATER THAT COMES ON
MY PLACE AND USES MY MAIN DITCHES
I IRRIGATE FROM.

MICROFILMED

MAR 14 1993

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For IRRIGATION purposes from MARCH 15 to Nov. 15 amount _____ or .6

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) _____ (cfs) and/or (b) .6 (acre feet)

8. Total consumptive use claimed is 90% acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) used FOR CROP IRRIGATION

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>33</u>	<u>105</u>	<u>18E</u>							<u>15</u>	<u>15</u>									<u>30</u>

Total number of acres irrigated 30

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

12. Do you own the property listed above as place of use? Yes ☒ 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.
TWIN FALLS CANAL Co. WATER RIGHT or None ()

14. Remarks: THIS IS FOR WASTE WATER THAT RUNS
THROUGH MY PLACE. I AM THE FIRST USER OF
THIS WASTE WATER.

MICROFILMED

Last Name Shropshire Ident No. _____

MAR 14 1993

Copies: White -State, Yellow-Claimant

Scale: 2 inches equals 1 mile

The image shows a hand-drawn map on a grid. The map includes several labeled areas and features:

- New 1/4**: A handwritten label in the upper central part of the grid.
- LEAFES HERE**: A handwritten label in the lower left corner, with an arrow pointing to a specific location.
- WASTE WATER INTERS HERE**: A handwritten label in the lower right corner, with an arrow pointing to a specific location.
- MY MAIN IRRIGATION ditch**: A handwritten label in the lower center, with an arrow pointing to a specific location.

MAR 14 1993

Copies: White-State, Yellow-Claimant

Last Name

Shropshire

Ident No.

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____

Decree _____

If applicable provide IDWR Water Right Number _____

Court _____ Case Number _____ Decree Date _____

Plaintiff vs Defendant _____

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

Signature of Claimant (s) Jack A. Shropshire Date 10/6/88

Emma H. Shropshire Date 10/6/88

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

Title _____

of _____, that I have signed the foregoing

Organization _____

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 _____

Title and Organization _____ Date _____

State of Idaho/or _____)

County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 6th day of October 19 88

SEAL

Notary Public Roxanne Story

Residing at Buhl, Id

My Commission Expires 6-30-94

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, _____ will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

MICROFILMED

MAR 14 1993

Last Name Shropshire Ident. Number _____

Copies White-State, Yellow-Claimant

10/27/1988

SRBA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME Shropshire CLAIM IDENT. NO. A47-12915DATE RECEIVED 10-6-88 CK # 0004342 AMOUNT \$ _____

- | | YES | NO |
|--|-------------------------------------|--------------------------|
| 1. Is the name and address complete with zip code? | ☒ | ☐ |
| 2. Is a priority date entered? | ☐ | ☐ |
| Is the water use exempt from the Permit requirements, or if it is not exempt, has a Permit been approved or a License issued?
A Permit is required: (1) for groundwater developed after March 25, 1963 (except single family domestic and stockwater wells using less than 13,000 gpd), or (2) for surface water developed after May 20, 1971 (except for instream stockwater). USE CARE IF CLAIM IS RETURNED. REFER TO ADJUDICATION MEMOS # 1 (ADJ. CLAIMS/APPLICATIONS) AND # 9 (REJECTION OF CLAIMS). EXPLAIN IN COMMENTS. | | |
| 3. (a) Is a source entered? | ☐ | ☐ |
| (b) Is a tributary to entered? (if required) | ☐ | ☐ |
| 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? | ☐ | ☐ |
| Is the consumptive use correct? | ☐ | ☐ |
| 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. | ☐ | ☐ |
| 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.) | ☐ | ☐ |
| 15. Is the basis of the claim indicated? | ☐ | ☐ |
| 16. Is the claim signed by the claimant, and is the signature appropriate? (If an individual is the claimant, has that individual signed the claim, or if an organization is the claimant, is the organization signature block complete?) | ☐ | ☐ |
| Has the claim been signed, sealed, and dated by a notary? | ☐ | ☐ |
| Was this claim filed on time, or was an extension granted? | ☐ | ☐ |
| Is the fee enclosed correct? | ☐ | ☐ |
| If this claim is based on an existing water right, has the identification number been entered? | ☐ | ☐ |
| Should this claim be receipted and data entered? | ☒ | ☐ |

Claim checked by: RatComments: return to verify and

MICROFIL

MAR 14 1993

DATE: 09/15/98
PAGE: 1

DIVERSION
VOLUME

0.60 CFS

TOTAL DIVERSION:
CONSUMPTIVE USE:

Stage: BENEFICIAL USE

TWIN FALLS COUNTY

MS

[illegible]

Other Rights: TWIN FALLS CANAL CO. WATER

9/15/98 SS: ADDRESS CHANGE, ROUTE TO GRID.

Objection Filed Date:

Field Inspection Flag:
Presumption Flag:

Notice to Mailer of Correction in Address

Addressee's Account Number (All numbers, dates, and letters)

47-12916, A47-12915

☐ No account number on mail

☐ Account number illegible

Addressee's Name

JACK JERMA THROPSHIRE

Old Address (Include apartment or suite number)

RT 2

City, State, and ZIP Code

KIMBERLY ID 83341-9998

New Address (Include apartment or suite number)

3552 N 3500 E

City, State, and ZIP Code

KIMBERLY ID 83341-9998

This card is furnished: ☐ For address correction, as requested (your mailpiece was forwarded).
☐ In place of Form 3579 (see reason for nondelivery below).

The address portion of your mailpiece was not readily detachable. Reason for nondelivery:

☐ Moved, left no address

☐ No such street

☐ No such number

☐ Refused

☐ Attempted, not known

☐ Unclaimed

PS Form 3547, June 1995

Records changed 9-15-98. - 12

RECEIVED

JAN 23 1995

Department of Water Resources
Southern Region

January 18, 1995 AH7-12915

State of Idaho
Department of Water Resources
222 Shoshone ST. E
Twin Falls, Idaho 83301

Re: Evidence of Property

Dear Sir:

Enclosed is an affidavit of
Personal Knowledge from ERMA (Neil) Shropshire
that a beneficial use water right was
established on the property 10 S 18 E 33 15 15.
If you need further information, please
let us know.

Sincerely

Erma Shropshire
Jack Shropshire

MICROFILMED

DEC 10 1996

RECEIVED

JAN 23 1995

Department of Water Resources
Southern Region

AFFIDAVIT

1-18-95

I, Erma (Nail) Shropshire, have personal knowledge that a beneficial use water right was established on property:

T	R	S	SW NW	SE NW	
10 S	18 E	33	15	15	Total acres 30.0

at least, and probably before 1925, as my parents, Tom and Dora Nail, my brother Bob and I, at age 5, moved on this property, as my dad had purchased it. The land has remained in the family since that time.

I have been aware of the water waste ditch on the above described property during my growing up years and since living there with my husband Jack Shropshire for most of the 47 years of our marriage.

Erma Shropshire

STATE OF ARIZONA
COUNTY OF COCHISE

1 ca.

MICROFILMED

Jan. 95

18th

DEC 10 1996

In witness whereof

Erma Shropshire

Alice Gunn

NOTARY PUBLIC

NOTARY PUBLIC

JAN 27 1997



State of Idaho
DEPARTMENT OF WATER RESOURCES
Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

Governor PHILIP E. BATT

R. KEITH HIGGINSON
Director

January 10, 1995

A47-12915
JACK SHROPSHIRE
ERMA SHROPSHIRE
RT. 2
KIMBERLY

ID 83341

RE: Evidence of Priority

* RESPONSE DEADLINE *
* MARCH 15, 1995 *

Dear Claimant:

The Notice of Claim identified with the number shown above your name on the mailing label has been filed in the Snake River Basin Adjudication (SRBA). The Notice indicates your water usage is based on "Beneficial Use" or a "Statutory Claim". Water rights of this type are established by the historical use of water, dating back to when water was first used for the purpose claimed. The date of first use, known as the priority date, has not been confirmed by a License, Decree or Permit. The Department will, at a later date, conduct reviews &/or field exams for the claims in your area. Since the priority date of a beneficial use water right can not be confirmed by field examination, **proof must be provided by the claimant supporting the priority date claimed.**

If you no longer own the property to which the claim is appurtenant please forward this correspondence to the present owner, or return it to the department. If you have received this correspondence from the previous owner of the property it is recommended that you file a Change of Ownership form with the Department in order to receive future mailings and to continue to be a party in the adjudication.

Please find enclosed a computer printout of your Notice of Claim and the pamphlet entitled "Evidence of Priority". The pamphlet describes the types of evidence required and suggests which documents will fulfill this requirement.

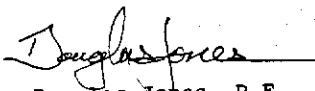
SPECIAL NOTE: The Department will not recommend the Notice be decreed by the court as claimed if no evidence of a priority date is submitted. It will be to your advantage to provide clear and convincing evidence. If you choose to submit statements from individuals as evidence, the statement must be in the form of a

January 10, 1995
page 2

notarized affidavit.

Please submit the required evidence supporting the priority date by March 15, 1995, referencing all documents with the corresponding Notice number. If you have any questions not covered by this letter or the enclosed pamphlet, please contact this office.

Sincerely,


Douglas Jones, P.E.
Water Rights Supervisor

Enc.

MICROFILMED
DEC 10 1996

W. A. Shropshire
3552 N 3500 E
Kimberly Ida
83341



ALWAYS USE
ZIP CODE



MICROFILMED
DEC 10 1996

State of Idaho
Dept of Water Resources, Southern Region
222 Shoshone St E
Twin Falls, Idaho 83301



Log for claim A47-12915

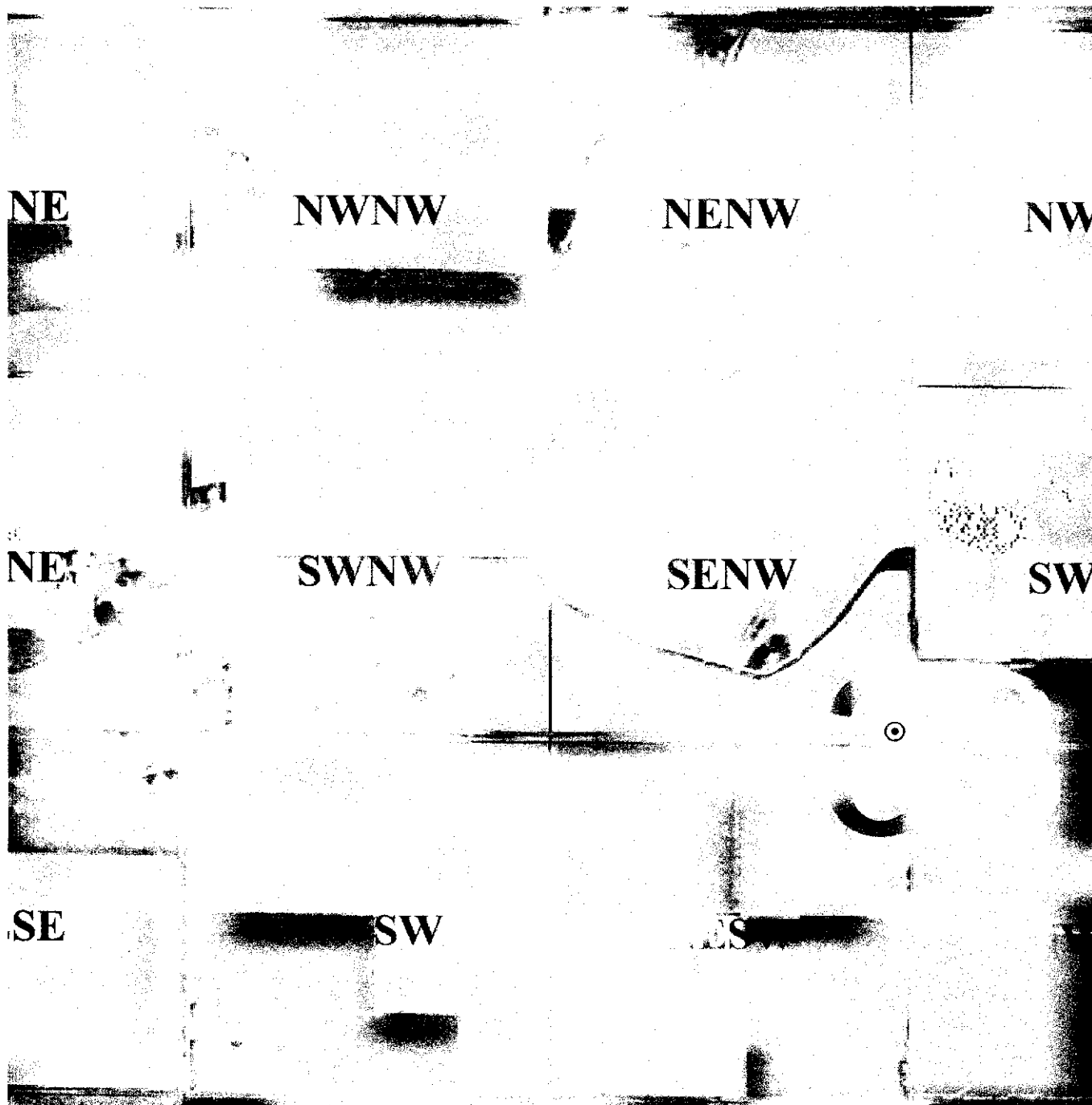
Spatial Dynamics BTD

10/30/00

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
10s18e	33	SWNW	15	35	Indiscernible
10s18e	33	SEnw	15	37	Indiscernible
Totals:			30	72	

Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000

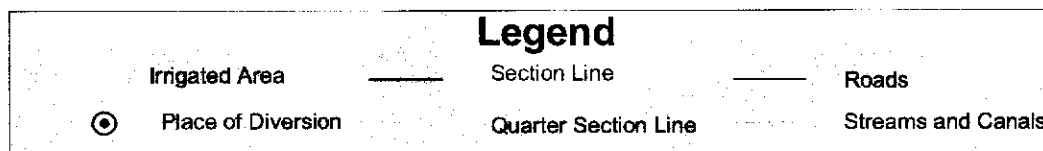
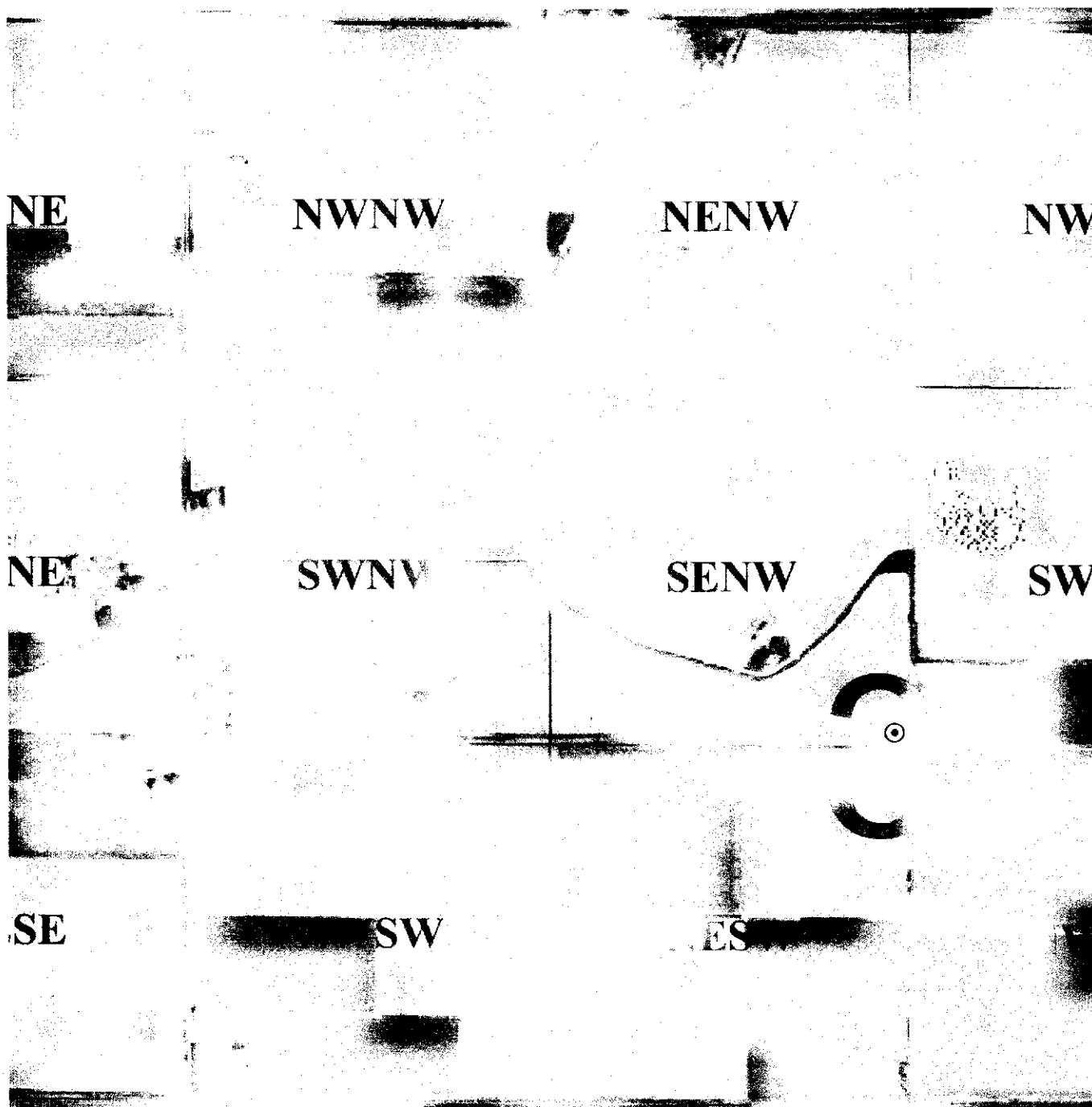


Legend			
Irrigated Area	Section Line	Roads	
Place of Diversion	Quarter Section Line	Streams and Canals	



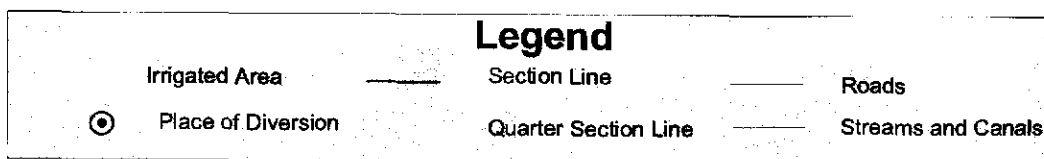
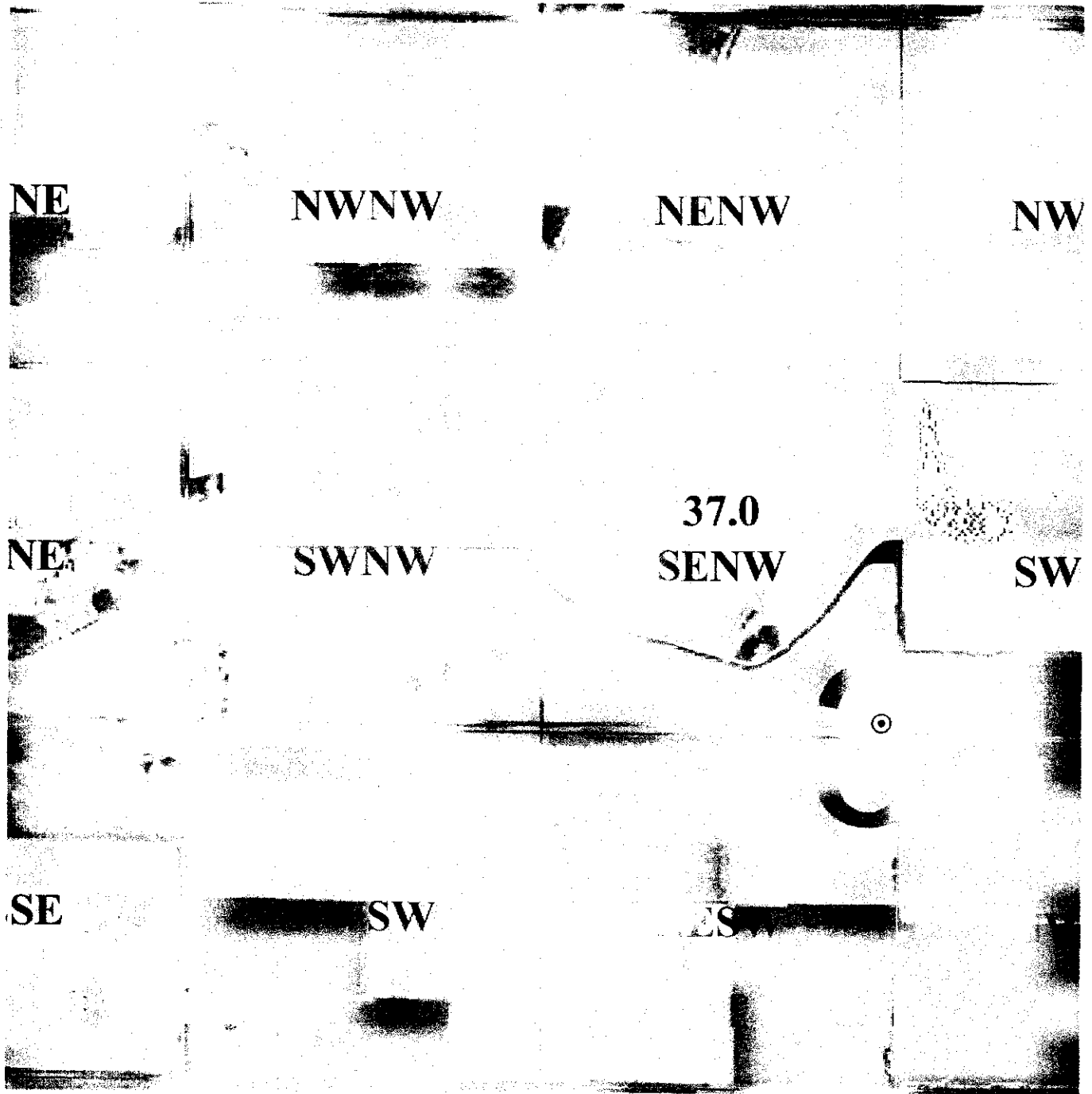
Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000



Water Right Claim Number A47-12915
Township , 10S18E

10/30/2000



AJ5809NP
No. A47-12915

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 10/03/00
PAGE: 402

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	JACK SHROPSHIRE	03/01/1935	IRRIGATION	03-15 11-15	0.600 CFS	
C	ERMA SHROPSHIRE 3552 N 3500 E KIMBERLY ID 83341 (208) 423-5044					
TOTAL DIVERSION:					0.600 CFS	
CONSUMPTIVE USE:						90.00 AFA

Water Source: UNNAMED DRAIN

Tributary to: SNAKE RIVER

Stage: BENEFICIAL USE

Point(s) of Diversion:

T10S R18E S33

SESENW

TWIN FALLS County

Place of use Legal Description for: IRRIGATION

NE				NW				SW				SE												
T	R	S	:	NENE	NWNE	SWNE	SENE	:	NENW	NWNW	SWNW	SENW	:	NESW	NWSW	SWSW	SESW	:	NESE	NWSE	SWSE	SESE	:	SUM
			:	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	:	
10S	18E	33	:					:			15	15	:					:					:	30.0
																							TOTAL ACRES	30.0

POU County: TWIN FALLS

Other Rights: TWIN FALLS CANAL CO. WATER

Other Water Rights Listing Overlapping Place(s) of Use:
A01-0020924

Remarks: GEN THIS IS FOR WASTEWATER THAT RUNS THROUGH PROPERTY. I AM THE FIRST
USER OF THIS WASTEWATER.

9/15/98 SS; ADDRESS CHANGE, ROUTE TO GRID.

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:

Presumption Flag:

Audit: 01/09/89 HARRINGT 03/30/95 POST-STD 09/15/98 SSHERMAN