

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: A47-07703
Date Received: 12/07/1988
Receipt No: S004317
Received By: tw

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: KIMBERLY NURSERIES 208-733-2717
Address: RT. 3
ADDISON AVE. E.
TWIN FALLS, ID 83301
2. Date of Priority: FEB 11, 1981
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:
- | Township | Range | Section | 1/4 of | 1/4 of | 1/4 of | Lot | County |
|----------|-------|---------|--------|--------|--------|-----|------------|
| 10S | 17E | 14 | NE | NE | | | TWIN FALLS |
5. Description of diverting works:
EXISTING WELLS & PUMPS.
6. Water is used for the following purposes:
- | Purpose | From | To | C.F.S. | (or) | A.F.A. |
|------------|-------|-------|--------|------|--------|
| COMMERCIAL | 01/01 | 12/31 | 0.200 | | 48.20 |
7. Total Quantity Appropriated is:
0.200 C.F.S. (and/or) 48.20 A.F.A.
8. Total consumptive use is Acre Feet Per Annum.
9. Non-irrigation uses:
C/GREENHOUSE & TREE NURSERY OPERATION.
10. Place of Use:
- | Township | Range | Section | 1/4 of | 1/4 of | Lot | Use | Acres |
|----------|-------|---------|--------|--------|-----|--------|-------|
| 10S | 17E | 14 | NE | NE | | COMMER | |
11. Place of use in counties: TWIN FALLS

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MICROFILMED

MAR 11 1993

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

13. Other Water Rights Used:
10 SHARES CANAL WATER

14. Remarks:
2 P/D IN NENE, S14, T10S, R17E.

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:

For Organizations:

I do solemnly swear or affirm that I am Corporate Secretary of
Kimberly Nurseries, Inc., that I have signed the foregoing
 Title
 Organization
document in the space below as corporate secretary of
Kimberly Nurseries, Inc. and that the statements contained in the
 Title
 Organization
foregoing document are true and correct.

F. Elaine Wright
Signature of Authorized Agent

corporate secretary / Kimberly
 Title and Organization
 Nurseries, Inc.
12-7-88
 Date

State of Idaho

County of TF

)
) SS.
)

Subscribed and sworn (or affirmed) before me this 7th day

of Dec 19 88

Lori White
Notary Public

Seal

Residing at TF

My Commission Expires 5/95