

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: A74-01826
Date Received: 5/03/1990
Receipt No: X999999
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: GERALD R. MORPHEY 208-756-2718
Address: 706 SHARKEY STREET
SALMON, ID 83467

AND/OR

Name: ROSE MORPHEY 208-756-2718
Address: 706 SHARKEY STREET
SALMON, ID 83467

2. Date of Priority: MAY 08, 1917

3. Source: SPRINGS Trib. to: MILL CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
16N	24E	1	NE	NE	NE	1	LEMHI
			SE		NE		LEMHI

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	1.000		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

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Date: 04/05/90

MICROFILMED

DEC 14 1992

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RECEIVED
MAY 03 1990

A7401826



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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
16N	24E	1	NE	NE	1	IRR	20.0
						Section Acres	20.0
	25E	6	NW	NW	4	IRR	7.0
						Section Acres	7.0
17N	25E	31	SW	SW	4	IRR	15.0
			SE	SW		IRR	8.0
						Section Acres	23.0
						Total Acres	50.0

11. Place of use in counties: LEMHI

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date:

Decree Plaintiff

vs

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

Signature of Claimant(s): Rose Murphy Date: 4-13-90

Date: _____

State of Idaho)
County of Lemhi) SS.

Subscribed and sworn (or affirmed) before me this 13th day

of April 19 90

Bonnie C. Grall
Notary Public

Seal

Residing at Salmon, Id.

My Commission Expires 6-17-93

4/5/1989

WA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME

Morphy

CLAIM IDENT. NO.

A74-01826DATE RECEIVED 5-3-90

CK #

AMOUNT \$ exempt

YES

NO

Required
Info?

1. Is the name and address complete with zip code? ☒ YES ☐ NO ☐ * Required Info?
2. Is a priority date entered? ☐ YES ☐ NO ☐ *
Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a permit is required. ☐ YES ☐ NO ☐ *
3. (a) Is a source entered? ☐ YES ☐ NO ☐ *
(b) Is a tributary to entered? (if required) ☐ YES ☐ NO ☐ N/A ☐ *
4. Is the legal description of the p.d. sufficient? ☐ YES ☐ NO ☐ *
5. Is there a description of the diverting works? ☐ YES ☐ NO ☐ *
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. ☐ YES ☐ NO ☐ *
Is the period of use included? ☐ YES ☐ NO ☐ *
Is a quantity claimed for each use? ☐ YES ☐ NO ☐ *
7. Is a total quantity claimed entered? ☐ YES ☐ NO ☐ *
8. If required is a consumptive use entered? ☐ YES ☐ NO ☐ N/A ☐ *
Is the consumptive use correct? ☐ YES ☐ NO ☐ 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. ☐ YES ☐ NO ☐ N/A ☐ *
10. Is (are) the place(s) of use and purpose(s) indicated? ☐ YES ☐ NO ☐ *
11. Is (are) the county(ies) entered? ☐ YES ☐ NO ☐ *
12. Is the ownership of p.u. checked? ☐ YES ☐ NO ☐ *
13. Are other water rights listed or "none" indicated? ☐ YES ☐ NO ☐ *
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.) ☐ YES ☐ NO ☐ N/A ☐ *
15. Is the basis of the claim indicated? ☐ YES ☐ NO ☐ *
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☐ YES ☐ NO ☐ N/A ☐ *
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ YES ☐ NO ☐ *
18. Has the claim been signed, sealed, and dated by a notary? ☒ YES ☐ NO ☐ *
19. Was this claim filed on time, or was an extension granted? ☒ YES ☐ NO ☐ *
20. Is the fee enclosed correct? ☐ YES ☐ NO ☐ Exempt ☒ *
21. If this claim is based on an existing water right, has the identification number been entered? ☐ YES ☐ NO ☐ N/A ☐ *
22. Should this claim be data entered? ☐ YES ☐ NO ☐ *

Claim checked by: RAEDate: 5-11-90

Claim must be returned to claimant:

☐ (Yes) ☒ (No)

Claimant must be notified of modifications:

☐ (Yes) ☒ (No)

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date:

Date:

Checked by:

AMICROFILMED

Comments:

DEC 14 1992