

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: 74-01834
DATE RECEIVED: 4-25-90
RECEIPT NO: X9-9
RECEIVED BY: LRW

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

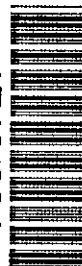
1. NAME: ALLAN F. PURCELL
ADDRESS: P.O. BOX 15
LEADORE, ID

83464

NAME: BETTY M. PURCELL
ADDRESS: P.O. BOX 15
LEADORE, ID

83464

A7401834



2. DATE OF PRIORITY: APR 01, 1951

3. SOURCE: BIG TIMBER CREEK TR18. TO: LEMHI RIVER

4. POINT OF DIVERSION:

TOWNSHIP	RANGE	SECTION	1/4 OF	1/4 OF	1/4	LOT	COUNTY
15N	26E	8	NW	SE			LEMHI

5. DESCRIPTION OF DIVERTING WORKS:

6. WATER IS USED FOR THE FOLLOWING PURPOSES:

PURPOSE	FROM	TO	C.F.S.	(CR)	A.F.A.
IRRIGATION	03/15	11/15	1.370		

7. TOTAL QUANTITY APPROPRIATED IS:
1.370 C.F.S. (AND/OR)

A.F.A.

8. TOTAL CONSUMPTIVE USE IS ACRE FEET PER ANNUM.

9. NON-IRRIGATION USES:

10. PLACE OF USE:

TOWNSHIP	RANGE	SECTION	1/4 OF	1/4	LOT	USE	ACRES
16N	25E	25	SE	NE		IRR	23.0
			NW	SW		IRR	34.0
SECTION ACRES							57.0
TOTAL ACRES							57.0

11. PLACE OF USE IN COUNTIES: LEMHI, 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: DECREE
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): John Russell DATE: April 25, 1990

DATE: _____

FOR ORGANIZATIONS:

I DO SOLEMNLY SWEAR OR AFFIRM THAT I AM _____ OF

TITLE
_____, THAT I HAVE SIGNED THE FOREGOING
ORGANIZATION
DOCUMENT IN THE SPACE BELOW AS _____ OF

TITLE
_____ AND THAT THE STATEMENTS CONTAINED IN THE
ORGANIZATION
FOREGOING DOCUMENT ARE TRUE AND CORRECT.

SIGNATURE OF AUTHORIZED AGENT

TITLE AND ORGANIZATION

DATE

STATE OF IDAHO)
COUNTY OF Ada) SS.

SUBSCRIBED AND SWORN (OR AFFIRMED) BEFORE ME THIS 25 DAY

OF April 19 90

Anda Wurm
NOTARY PUBLIC

SEAL

RESIDING AT _____

MY COMMISSION EXPIRES

74-01834

PAGE

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DATE: 02/08/90 MICROFILMED

DEC 14 1992