

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: A74-01866
Date Received: 5/09/1990
Receipt No: X999999
Received By: *[Signature]*

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT B. AMONSON 208-529-6843
Address: C/O P. O. BOX 51
LEMHI, ID 83465

OR

Name: DIANE B. AMONSON 208-529-6843
Address: C/O P. O. BOX 51
LEMHI, ID 83465

2. Date of Priority: MAY 01, 1889

3. Source: WASTEWATER Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
16N	25E	5	NW	SE			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	1.800		

7. Total Quantity Appropriated is:
1.800 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
17N	25E	31	NE	SE		IRR	2.0

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DEC 14 1992

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
					Section Acres	2.0
		32	SW	NW	IRR	18.0
			SE	NW	IRR	14.0
			NE	SW	IRR	16.0
			NW	SW	IRR	25.0
			SE	SW	IRR	10.0
			SW	SE	IRR	5.0
					Section Acres	88.0
					Total Acres	90.0

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:

AC. IRR.=89.9.

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): Robert L. Amouison Date: 5/9/90

Date: _____

State of Idaho)
County of BONNIVILLE) SS.

Subscribed and sworn (or affirmed) before me this 9 day
of May 19 90

[Signature]
Notary Public

Seal

Residing at 1. M. H. Bous

My Commission Expires 9-12-94