

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: A75-04015
Date Received: 5/03/1990
Receipt No: 1006893
Received By: CF

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: WILLIAM B. GALLIGAN 208-865-2383
Address: HC 64 BOX 111
NORTH FORK, ID 83466
OR
Name: SUE M. GALLIGAN 208-865-2383
Address: HC 64 BOX 111
NORTH FORK, ID 83466

2. Date of Priority: MAR 15, 1918

3. Source: SPRING CREEK, WEST FORK Trib. to: SPRING CREEK
SPRING CREEK, EAST FORK SPRING CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
24N	19E	7	NE	SW			LEMHI
			SE	SW			LEMHI
			SW	SE			LEMHI

5. Description of diverting works:
3 ROCK DIVERSION DAMS, DITCHES, AND PIPELINE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.180		

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

8. Total consumptive use is 22.5 Acre Feet Per Annum.

9. Non-irrigation uses:

A75-04015

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Date: 05/03/90

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DEC 15 1992

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
24N	19E	7	SW SE		IRR	9.0
Section Acres						9.0
Total Acres						9.0

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:
NONE

14. Remarks:
H.E.S. 544

15. Basis of Claim: STATUTORY CLAIM

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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: -2-

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): William B. Galt Date: 5/3/90

Date: _____

State of Idaho)
County of Lemhi) SS.

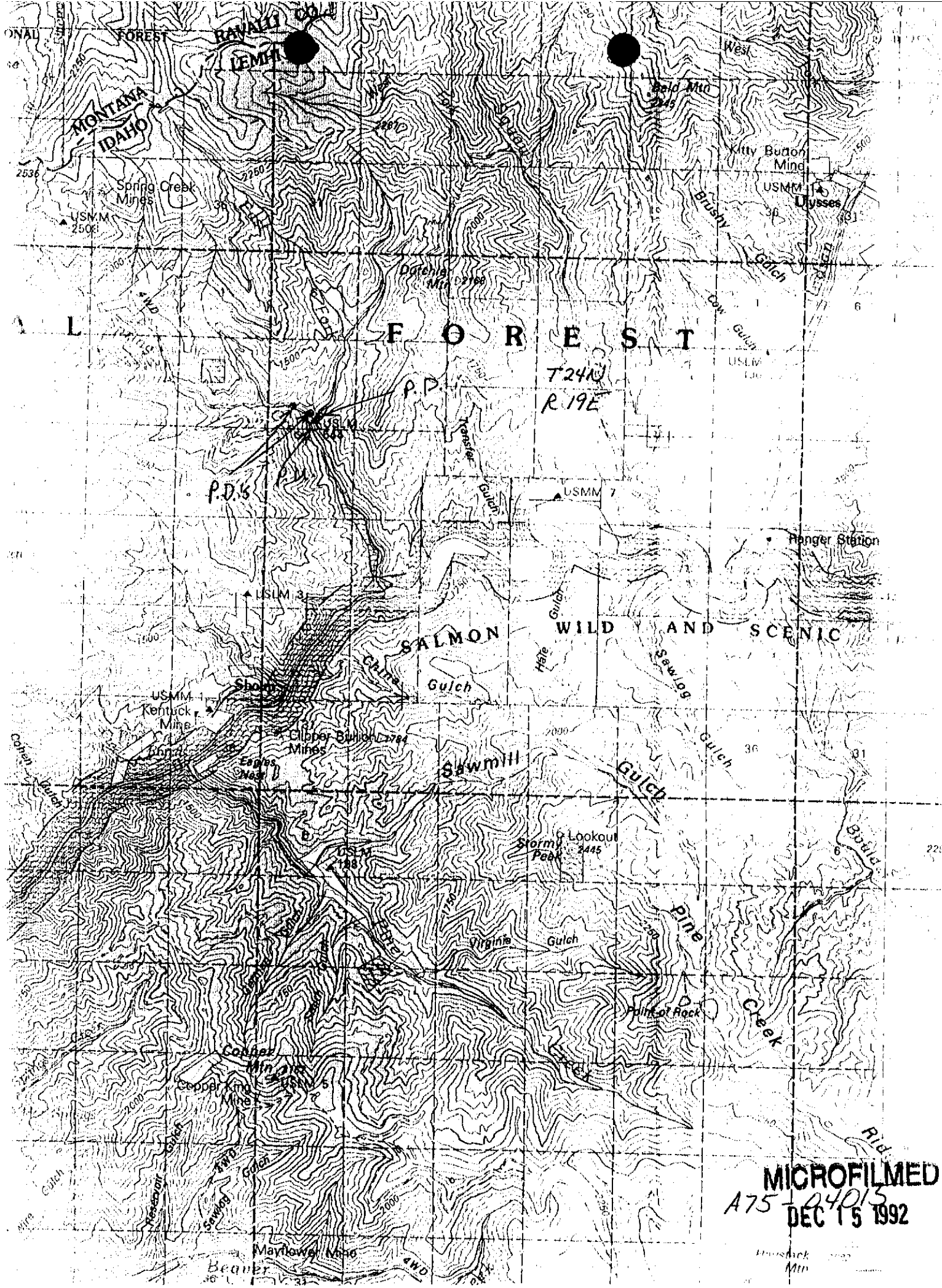
Subscribed and sworn (or affirmed) before me this 3rd day

of May 19 90

Carter Fritschle
Notary Public

Seal

Residing at Carter Fritschle, Notary Public
Residing at Eagle, Idaho
My Commission Expires March 21, 1994



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A75-04013
DEC 15 1992

UNITED STATES DEPARTMENT OF AGRICULTURE

FOREST SERVICE

SALMON NATIONAL FOREST

MAR 7 1919

L
Claims-Salmon
~~Bohannon, H.E.~~
Hailey-H.E. 023676

1. CLAIMANT.

Daniel Collier, present residence or address unknown.
Claimant is not known to be married or to have a family.

2. DESCRIPTION OF CLAIM.

Location of claim is in unsurveyed sections 12, T 24 N, R 18 E, B.M., and in section 7, T 24 N, R 19 E, B.M., at the Forks of Spring Creek approximately three miles north of the North Fork-Shoup stage road.

3. TOPOGRAPHY AND SURFACE.

Claim lies on and about the confluence of the two main branches of Spring Creek and mainly consists of flat area of creek bottom running back to the sloping sides of the surrounding hills. The altitude is approximately 3400 feet above sea. The slope of the bottom land is gradual and slight and toward the south. The portion of the claim bordering on the surrounding hills has slopes from 20 to 45 per cent. Approximately 8 acres would be suitable for tilling.

4. SETTLEMENT AND RESIDENCE.

Claimant settled on the land March 15, 1918. Date of filing May 12, 1919. Actual residence was established March 15, 1918. During the season of 1918, claimant resided on claim and tilled and improved approximately 3 acres, constructed ditches for irrigation and fenced a small area. At this time claimant was married and his wife resided with him on the claim. In July of year 1918, the wife died and the claimant left the claim to accept employment of various short periods at nearby ranches. During the summer claimant was called in the draft and left the ranch without a tenant. During the following years of 1919, 1920, 1921, 1922 and up to the present date of 1923, no other residence of the claimant on the claim in question is to be reported. After the month of July 1918, no cultivation of the claim was performed. The implements for farming were removed in 1918, and nothing remains in the house at the present time except a few useless kitchen utensils, an iron bed, springs and a mattress partly destroyed. The following names of witnesses for reference are submitted:
J. R. Hibbs, Ulysses, Oscar Westfall, Ulysses, Idaho, and Chas. Twining, Shoup, Idaho.

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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: A75-04016
Date Received: 5/09/1990
Receipt No: X777777
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SPLIT RIGHT

Address:

XXXXXXXXXX, ID

00000

2. Date of Priority: SEP 05, 1928

3. Source: SPRING CREEK, WEST FORK
SPLIT RIGHT

Trib. to: SALMON RIVER

4. Point of Diversion:

Township Range Section 1/4 of 1/4 of 1/4 Lot
65N 46E 36

County
SUBSCRIPTION

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.240		
DOMESTIC	01/01	12/31	0.020		

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

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:
D/4 HOMES.

10. Place of Use:

Township Range Section 1/4 of 1/4 Lot Use
65N 46E 36 IRR

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Date: 05/09/90

A7504016



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11. Place of use in counties: SUBSCRIPTION

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

13. Other Water Rights Used:

14. Remarks:

P/D & P/U H.E.S. 544, S7, T24N, R19E.

AC. IRR. = 12.

SPLIT RIGHT.

A75-04016A. .04 CFS. FOR 2 AC. ROBERT DANIELS.

15. Basis of Claim:

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 _____