

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: A75-04145
Date Received: 5/09/1990
Receipt No: M006998
Received By: DC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MICHAEL OVERACKER 208-756-2809
Address: 1510 HWY 93N
SALMON, ID 83467
OR
Name: MERRIDEE OVERACKER 208-756-2809
Address: 1510 HWY 93N
SALMON, ID 83467
OR
Name: FERNE OVERACKER 208-756-2809
Address: 1510 HWY 93N
SALMON, ID 83467

2. Date of Priority: JUL 27, 1896

3. Source: BOB MOORE CREEK Trib. to: SALMON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
22N	21E	25	SE	NW	SE		LEMHI
			NE	SW	SE		LEMHI

5. Description of diverting works:
DAM/ DITCHES

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/01	11/01	6.000		
STOCKWATER	01/01	12/31	0.200		

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

8. Total consumptive use is 887.5 Acre Feet Per Annum.

9. Non-irrigation uses:

S/ 400 HEAD CATTLE, 25 DAIRY CATTLE

10. Place of Use:

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
22N	21E	25	NE		SE		IRR	23.0
			SW		SE		IRR	3.0
			SE		SE		IRR	15.0
			Section Acres					41.0
	22E	30	NW		NE		IRR	39.0
			SW		NE		IRR	39.0
			NE		NW		IRR	40.0
			NW		NW	1	IRR	12.0
			SW		NW	2	IRR	30.0
			SE		NW		IRR	40.0
			NE		SW		IRR	40.0
			NW		SW	3	IRR	35.0
			NW		SE		IRR	39.0
			Section Acres					314.0
			Total Acres					355.0

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:
75-04207

14. Remarks:

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

Number of attachments: _____

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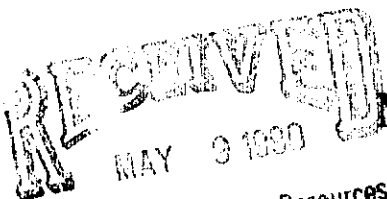
A75-04145

Date Received

5/9/90

Receipt Number

M006998



Department of Water Resources

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) MICHAEL OVERACKER & /or Phone (208) 756-2809
MERRIDEE OVERACKER & /or
FERNE OVERACKER
 Mailing Address 1510 Hwy 93N, SALMON, ID. Zip 83467

2. Date of Priority (Only one (1) per claim) 7-27-1896 (July 27, 1896)

3. Source of water supply (a) Bob MOORE CREEK & UNNAMED tributary
 which is tributary to (b) SALMON RIVER

4. a. Location of existing point of diversion is: Township 22N Range 21E Section 25,
NE 1/4 of SW 1/4 of SE 1/4, Govt. Lot, _____ B.M., County of Lemhi

Additional points of diversion if any: SE 1/4 NW 1/4 SE 1/4 S 25 22N 21E

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
 including the dates of any changes or enlargements in use, the dimensions of the diversion works as
 constructed and as enlarged and the depth of each well.

HEADGATE AND Lateral Ditch ; DAM CREEK with
PLASTIC DAM to divert thru headgate.

A7504145



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(acre feet)

For _____ purposes from _____ to _____ amount _____ or _____

8. Total consumptive use claimed is _____ acre feet per annum.

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

Total number of acres irrigated 344 355 n.o.

11. In which county (ies) are lands listed above as place of use located? Lemhi

12. Do you own the property listed above as place of use? Yes X No
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
Norton Ditch Co. Claim # 75 4207 or None ()

14. Remarks:

ONE DOLLAR 1 ACRE FILING FEE ALREADY PAID IN
SECTION 30 BY NORTON DITCH CO. A75-04207

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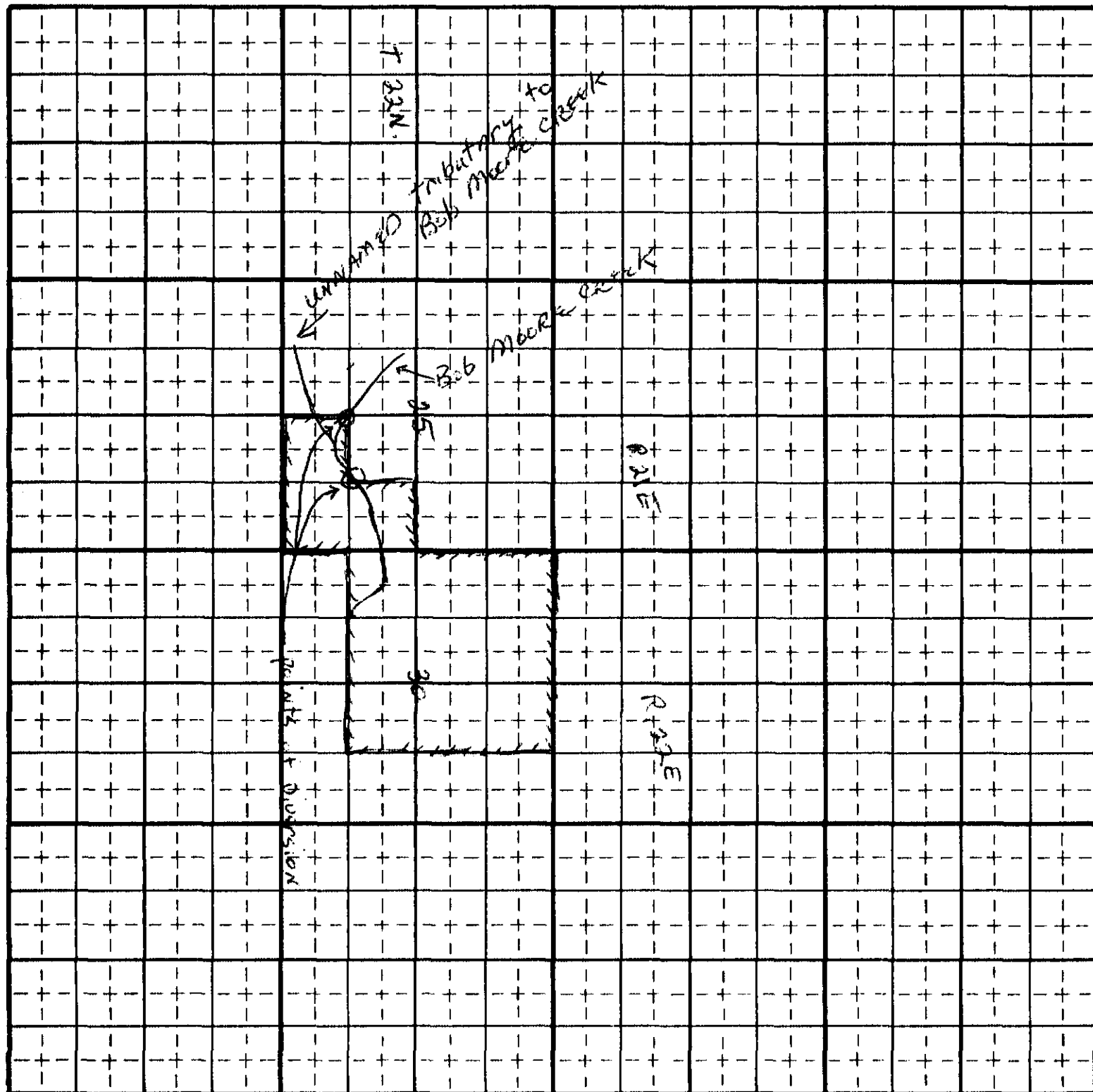
DEC 15 1992

Last Name OVERACKER Ident No. _____

Copies: White -State, Yellow-Claimant

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



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Last Name OVERACKER

Ident No. _____

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____

Decree _____

If applicable provide IDWR Water Right Number 75 4145

Court _____ Case Number _____ Decree Date _____

Plaintiff vs 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 do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Michael Overacker Date May 4, 1990

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

Title _____

of _____, that I have signed the foregoing

Organization

document in the space below as _____ of _____

Title

Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of Lemhi) SS.

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

SEAL

Notary Public Sandra Hendricks

Residing at Salmon

My Commission Expires 10-21-94

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, _____ will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name OVERACKER Ident. Number _____

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