

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: A75-07086
Date Received: 5/25/1990
Receipt No: E014134
Received By: DC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: GUY D. ROBERTS 208-756-2602
Address: BOX 5
CARMEN, ID 83462

OR

Name: OPAL E. ROBERTS 208-756-2602
Address: BOX 5
CARMEN, ID 83462

2. Date of Priority: MAR 23, 1977

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
22N	22E	7	NE	NE			LEMHI
		8	NW	NW			LEMHI

5. Description of diverting works:
WELLS, PUMP, PIPELINES & SPRINKLERS.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.040		6.00
DOMESTIC	01/01	12/31	0.040		1.20

7. Total Quantity Appropriated is:
0.080 C.F.S. (and/or) 7.20 A.F.A.

8. Total consumptive use is 5.0 Acre Feet Per Annum.

9. Non-irrigation uses:
D/ ONE HOME

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
22N	22E	7	NE	NE		IRR	1.0
						Section Acres	1.0
		8	NW	NW		IRR	1.0
			NW	NW		DOMEST	
						Section Acres	1.0
						Total Acres	2.0

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:

15. Basis of Claim: LICENSE

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: _____

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ACQUIRED UNDER STATE LAW

RECEIVED

MAY - 3 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Frank Roberts or Guy Roberts

Phone (208) 756-2602

Mailing Address Carmen Idaho, Box 5Zip 834622. Date of Priority (Only one (1) per claim) 3-23-773. Source of water supply (a) Ground water

which is tributary to (b) _____

4. a. Location of existing point of diversion is: Township 22N Range 22E Section 8NW 1/4 of NW 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of LemhiAdditional points of diversion if any: NE 1/4 NE 1/4 Sec 7, T. 22N, R. 22E

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, 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.2 wells, pumps & pipe systems
for domestic use and sprinkler for system
for irrigation
proposed well diameter is 6 in.
18 ft. & 30 foot.
Proposed depth of wells are

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DEC 15 1992

A7507086



6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Domestic purposes from Jan 1 to Dec 1 amount 0.04 or 0.04

For Irrigation purposes from April 1 to Nov 1 amount 0.04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.08 (cfs) and/or (b) _____ (acre feet)

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

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) 1 house hold.

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.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>22N</u>	<u>22E</u>	<u>7</u>	<u>1</u>																<u>1</u>
		<u>8</u>					<u>1</u>												<u>1</u>

Total number of acres irrigated 2

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

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

or None (✓)

14. Remarks:

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Last Name Roberts Ident No. _____

Copies: White -State, Yellow-Claimant

Scale: 2 inches equals 1 mile

A 15x15 grid with handwritten text and symbols. The text includes "RGE 22 E" at (1,9), "TWP 12 N" at (12,1), "7" at (7,7), "8" at (8,8), "10- ME LGS" at (10,10), and "1- PROPERTY BOUNDARY" at (11,11). There is also a small box with "10" at (7,9).

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Last Name

Opal Roberts

Ident No.

39576

Copies: White-State, Yellow-Claimant

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

Decree _____

If applicable provide IDWR Water Right Number 75-07080

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 X 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) Opal Roberts Date May 2 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 2 day of May 19 90

SEAL

Notary Public Alberta Frederick

Residing at Salmon

My Commission Expires 6-14-92

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 _____

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Last Name Roberts Ident. Number _____

Copies White-State, Yellow-Claimant