

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: A75-10642

Date Received:

Receipt No: 1006986

Received By: RTF

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SALMON VALLEY ASSOCIATES 208-756-3543
Address: LIMITED PARTNERSHIPS
RT. 1 BOX 221 AIRPORT RD.
SALMON, ID 83467

2. Date of Priority: MAY 01, 1960

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
21N	22E	29	SE	SW	SW		LEMHI

5. Description of diverting works:
2 WELLS BOTH 36' DEEP, WL @ 22', EACH WELL PUMPS 60 GPM

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
COMMERCIAL	01/01	12/31	0.130		
IRRIGATION	04/01	11/01	0.030		

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

8. Total consumptive use is 2.5 Acre Feet Per Annum.

9. Non-irrigation uses:
C/ 40 BED LONG TERM CARE FACILITY

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Notes
21N	22E	29	SW	SW		CORNER

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10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
21N	22E	29	SW	SW		IRR	1.0
Section Acres							1.0
Total Acres							1.0

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:

THE HEADQUARTERS FOR THE LIMITED PARTNERSHIP IS AT THE FOLLOWING
ADDRESS: P.O. BOX 105 NORCROSS, IA 30091

THE WELLS WERE DRILLED AT THE SAME TIME AND ONE WELL SUPPLIES
WATER TO THE FACILITY WITH THE OTHER UTILIZED AS A BACK UP AND TO
IRRIGATE THE 1 ACRE OF LAWN.

15. Basis of Claim: BENEFICIAL USE

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 Organizations:

I do solemnly swear or affirm that I am Administrator of Salmon Valley Associates Limited Partnerships, that I have signed the foregoing Organization

document in the space below as Administrator of Salmon Valley Associates Limited Partnerships and that the statements contained in the Organization foregoing document are true and correct.

Administrator/Salmon Valley Associates Limited Partnerships Signature of Authorized Agent
Title and Organization

5-8-90
Date

State of Idaho)
County of Lemhi) SS.

Subscribed and sworn (or affirmed) before me this 8th day
of May 19 90

Seal

Anna Baumhoff
Notary Public

Anna Baumhoff, Notary Public
Residing at Residing at Boise, Idaho
My Commission Expires December 7, 1994
My Commission Expires _____

R77

22E

SALMON SW QUADRANGLE
IDAHO-LEMHI CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)

(318-1-1)
(SALMON NE)

113° 52' 30"
45° 07' 30"



T. 21 N.
T. 20 N.

TZIN
T20N

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