

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: A75-10850
Date Received: 5/27/1993
Receipt No: E014490
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: BRUCE SMITH 208-756-4861
Address: PO BOX 888
SALMON ID 83467
OR
Name: ELLEN SMITH 208-756-4861
Address: PO BOX 888
SALMON ID 83467

A7510850

2. Date of Priority: JAN 1, 1892

3. Source: SPRING Trib. to: SALMON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
21N	22E	7	NW	SE	SE		LEMHI

5. Description of diverting works:
DITCHES WITH FLOOD IRR

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.060		
STOCKWATER	01/01	12/31	0.020		

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

8. Total consumptive use is 7.5 Acre Feet Per Annum.

9. Non-irrigation uses:
STOCKWATER/ 50 HD SHEEP

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
21N	22E	7	SE	SE		IRR	3.0
			SE	SE		STOCK	

Section Acres 3.0

Total Acres 3.0

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:

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 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: _____

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
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CIVIL CASE NUMBER: 39576

Ident. Number A75-10850

Date Received 5-10-90

Receipt Number E014490

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

MAY 11 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Bruce or Ellen Smith Phone () 756-4861

Mailing Address PO Box 888 Salmon ID Zip 83467

2. Date of Priority (Only one (1) per claim) 1/1/1892

3. Source of water supply (a) Spring
which is tributary to (b) Salmon River

4. a. Location of existing point of diversion is: Township 21N Range 22E Section 7,
NW 1/4 of SE 1/4 of SE 1/4, Govt. Lot, _____ B.M., County of Lemhi

Additional points of diversion if any: _____

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

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

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. Ditches with Flood Irr

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Irrigation purposes from 4/1 to 11/1 amount .06 or _____

For Stockwater purposes from 1/1 to 12/31 amount .02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .08 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 7.5 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) 5/50hd sheep

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>2W</u>	<u>22E</u>	<u>7</u>																<u>0.3</u>	<u>3</u>

Total number of acres irrigated 3

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.
_____ or None ()

14. Remarks:

Last Name _____ Ident No. _____

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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 _____

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) Bruce H. Smith Date 5-4-90

Ellen Weaver Smith Date 5-10-90

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

~~of _____, Title _____, that I have signed the foregoing~~

~~document in the space below as _____ of _____~~

~~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 10th day of May 19 90

SEAL

Notary Public Connie D. Trogdon

Residing at Salmon, Idaho

My Commission Expires 7-10-92

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 _____

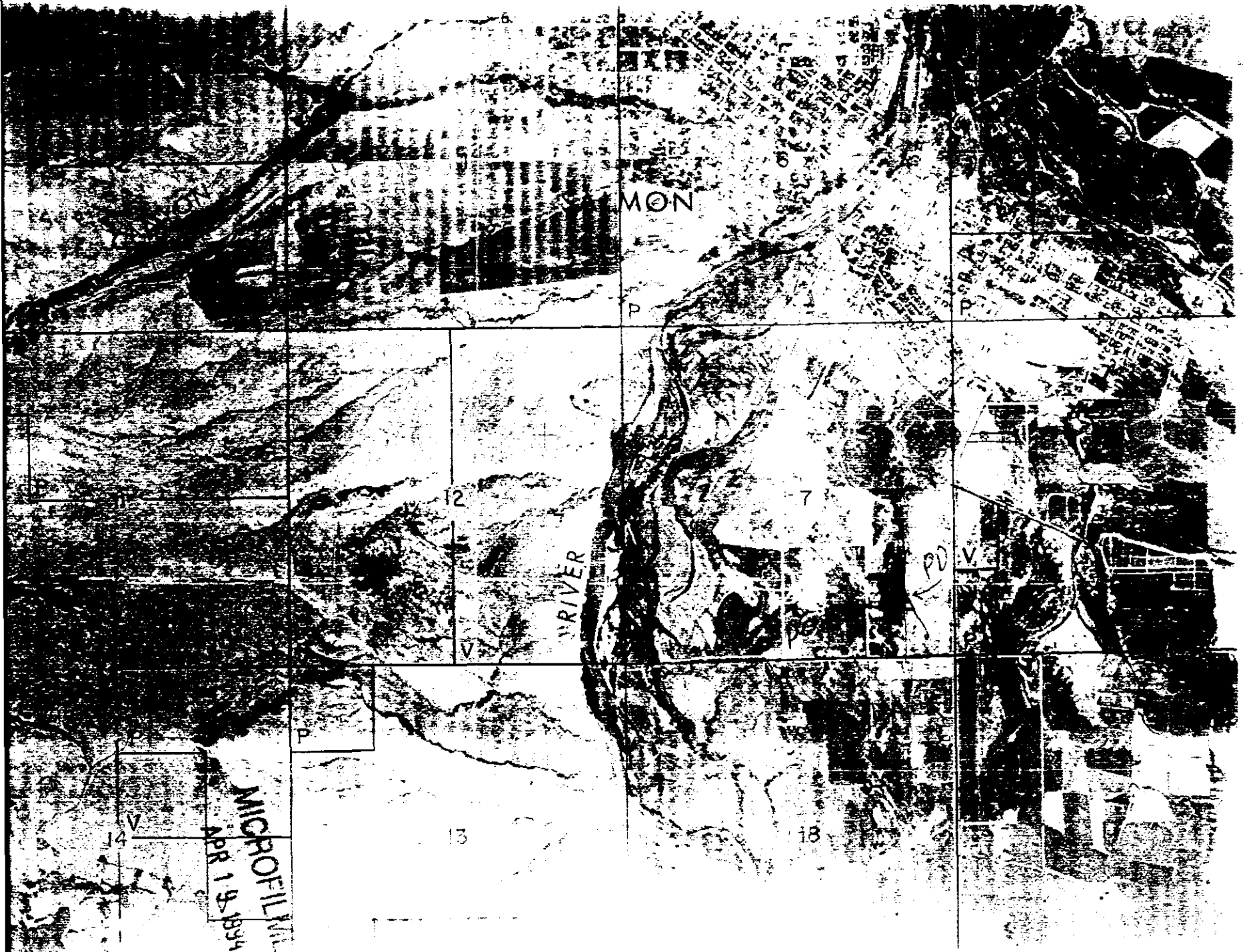
Date _____

Last Name _____ Ident. Number _____

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Copies White-State, Yellow-Claimant



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