



STATE OF IDAHO

OFFICE OF THE ATTORNEY GENERAL

ALAN G. LANCE

December 11, 2002

Dear Claimant(s):

I am the Deputy Attorney General for the Idaho Department of Water Resources working on the SRBA in Basin 29. After reviewing your water right claim, it appears that the priority date you claimed for your water right(s) might not be correct and that October 10, 1878, might be the appropriate priority date for your claim(s). In order to recommend this priority date, which is earlier than the priority date you originally claimed, your claim(s) would need to be amended. Therefore, I have enclosed for your review and signature an amended claim form. If you would like to amend your claim(s) to reflect the earlier priority date please initial the change on the amended claim form and have your signature notarized; then, return the signed amended claim in the enclosed self-addressed envelope.

The Department intends to issue its preliminary Director's Report for your water right(s) in January, 2003. If we do not receive the signed, notarized amended claim form from you prior to January 10, 2003, the Department will recommend your water right(s) with the priority date no earlier than the priority date that you have currently claimed.

If you have any questions concerning this matter, you can contact me at (208) 327-5404 or Allen Ruberry, Senior Water Resource Agent with IDWR's Eastern Region Office at (208) 525-7161.

Very Truly Yours,

A handwritten signature in cursive script, reading "Candice M. McHugh".

Candice M. McHugh
Deputy Attorney General, IDWR

Enclosures

cc: Allen Ruberry

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 29-322
Date Received: 4/25/1990
Receipt No: E013683
Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

AMENDED

1. Name of Claimant(s)

DAVE TREASURE
22703 S MARSH CREEK RD
DOWNEY ID USA 83234

Phone: (208)897-5630

2. Date of Priority: ~~06/09/1904~~ 10/10/1878

3. Source: BIRCH CREEK , BIRCH CREEK , BIRCH CREEK Trib. to: MARSH CREEK , MARSH CREEK , MARSH CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot		County	Type
11S	36E	36	NW	NW	BANNOCK	
11S	36E	35	SE	SW	BANNOCK	R
12S	36E	23	SE	NW	BANNOCK	

5. Description of diverting works:

DIVERSION DAM TO DITCH TO PIPELINE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	3/15	11/15	6.07	

7. Total Quantity Appropriated is:
6.07 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
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11S	36E	25	SE	SE	IRRIGATION	12
			NE	NW	IRRIGATION	12
			NW	SW	IRRIGATION	15
			SW	SW	IRRIGATION	12
			SE	SW	IRRIGATION	27
			SW	SE	IRRIGATION	32
					Section Acres	110
11S	36E	26	SE	NE	IRRIGATION	20
			NW	SE	IRRIGATION	39
			SW	SE	IRRIGATION	37
			SE	SE	IRRIGATION	35
			NE	SE	IRRIGATION	39
					Section Acres	170
11S	36E	30	NE	NE	IRRIGATION	0.3
					Section Acres	0.3
11S	36E	36	NE	NE	IRRIGATION	15
			NW	NE	IRRIGATION	8
					Section Acres	23
					Total Acres	303.3

11. Place of use in counties: BANNOCK

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

13. Other Water Rights Used:

14. Remarks:

SEE DECREE FOR LAND LIST.
DIVERSION RATE 1/6 FLOW OF CREEK.
PRIORITY DATE TAKEN FROM DECREE.

Use of water under this water right will be regulated by the watermaster of
State Water District No. &DISTRICT.

15. Basis of Claim: Decreed

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
of _____ 20__

Notary Public

Residing at _____

My commission Expires _____