

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re SRBA

) SUBCASE NO: 29-146
)
)
)

(Insert Water Right Number)

Case No. 39576

) STANDARD FORM 4
)
)

) MOTION TO FILE:
)

) ☐ LATE NOTICE OF CLAIM
)

) ☒ AMENDED NOTICE OF CLAIM
_____)

INSTRUCTIONS

This form is used to file a late Notice of Claim or an amendment to a Notice of Claim in a reporting area where the Director's Report has been filed. Forms may be obtained from the SRBA Court, the Idaho Department of Water Resources (IDWR), or you may copy or reproduce this blank form. If you copy or reproduce this form, please copy on both sides with the even number pages upside down.

The water right number for your late or amended claim must be indicated above in the blank space following "Subcase." You must use a separate form for each late or amended Notice of Claim.

This form has been adopted by the court in *SRBA Administrative Order 1, Rules of Procedure* (amended Sept. 30, 1996), Section 4, which may be consulted for further information.

By filing a *Motion to File a Late Notice of Claim* or a *Motion to File an Amended Notice of Claim*, you certify that it is well-grounded in fact; is warranted by existing law or a good-faith argument for the extension, modification or reversal of existing law; and is not filed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation.

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

RECEIVED

Ident. Number: A29-00146
Date Received:
Receipt No:
Received By:

Amended

Department of Water Resources
Eastern District Office

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: FAWN A. POTTER 208-776-5669
Address: P.O. BOX 632
LAVA HOT SPRINGS, ID 83246
OR
Name: TERESA J. POTTER 208-776-5669
Address: P.O. BOX 632
LAVA HOT SPRINGS, ID 83246

2. Date of Priority: MAR 01, 1894

3. Source: FISH CREEK Trib. to: PORTNEUF RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
09S	38E	25	NW	NW	NW		BANNOCK

5. Description of diverting works:

PUMP MAINLINE TO ~~LATERALS FOR FLOOD IRRIGATION~~

SPRINKLER Main Lines & Pivot

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/15	09/15	~~0.500~~		
			0.278		

7. Total Quantity Appropriated is:

~~0.500~~ C.F.S. (and/or)

0.278

A.F.A.

8. Total consumptive use is ~~32.5 Acre Feet Per Annum.~~

9. Non-irrigation uses:

NONE

A29-00146

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Date:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
09S	38E	25	NW	NW		IRR	~~13.0~~ 13.6
Section Acres							~~13.0~~ 13.6
Total Acres							~~13.0~~ 13.6

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:
NONE

14. Remarks:

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date:

UNION GRAIN & ELEVATOR CO.
Decree Plaintiff

vs

MCCAMMON DITCH CO. ET. AL.
Decree Defendant

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) Sam A Potter Date 4-21-04
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 Ada) SS.

Subscribed and sworn (or affirmed) before me this

21 ST day of April 2004
Notary Public [Signature]
Residing at Edinburg TX
My Commission Expires 1-27-09



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 _____