

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 63-3515
Date Received: 7/19/2004
Receipt No: W032000
Received By:

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

LYNN MERIDY RHODES Phone: (208)286-7501
PO BOX 191
STAR ID USA 83669

2. Date of Priority: 05/24/1966

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 Lot	County	Type
04N	01W	17	NE	NW		ADA	

5. Description of diverting works:

Drilled well with gravity.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	03/15	11/15	0.08	
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.12 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
04N	01W	17	NE	NW	IRRIGATION	4
					Section Acres	4
					Total Acres	4

11. Place of use in counties: ADA

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

13. Other Water Rights Used: Pioneer Irrigation

14. Remarks:

15. Basis of Claim: License

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

63-3515

Date Received

7/19/04

Receipt Number

W032006

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

JUL 19 2004

WATER RESOURCES
WESTERN REGION

Please type or print clearly

1. Name of Claimant (s)

LYNN MERIDY RHODES

Phone

208 286-7501

Mailing Address

PO BOX 191 STAR ID

Zip

83669

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

MAY 24, 1966

3. Source of water supply (a)

GROUND WATER

which is tributary to (b)

4. a. Location of existing point of diversion is: Township

4N

Range 1W

Section 17

NE 1/4 of

NW 1/4 of

Govt. Lot,

B.M., County of

ADA

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 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.

DRILLED WELL WITH GRAVITY

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For DOMESTIC purposes from 1-1 to 12-31 amount _____ or POINT 04 CFS
For IRRIGATION purposes from 3-15 to 11-15 amount _____ or .08
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

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

8. Total consumptive use claimed is ~~1.12~~ .12 acre feet per annum.

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

10. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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>4N</u>	<u>1W</u>	<u>17</u>					<u>4</u>												<u>4</u>

Total number of acres irrigated _____

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

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.
DITCH WATER THROUGH PIONEER IRRIG. or None ()

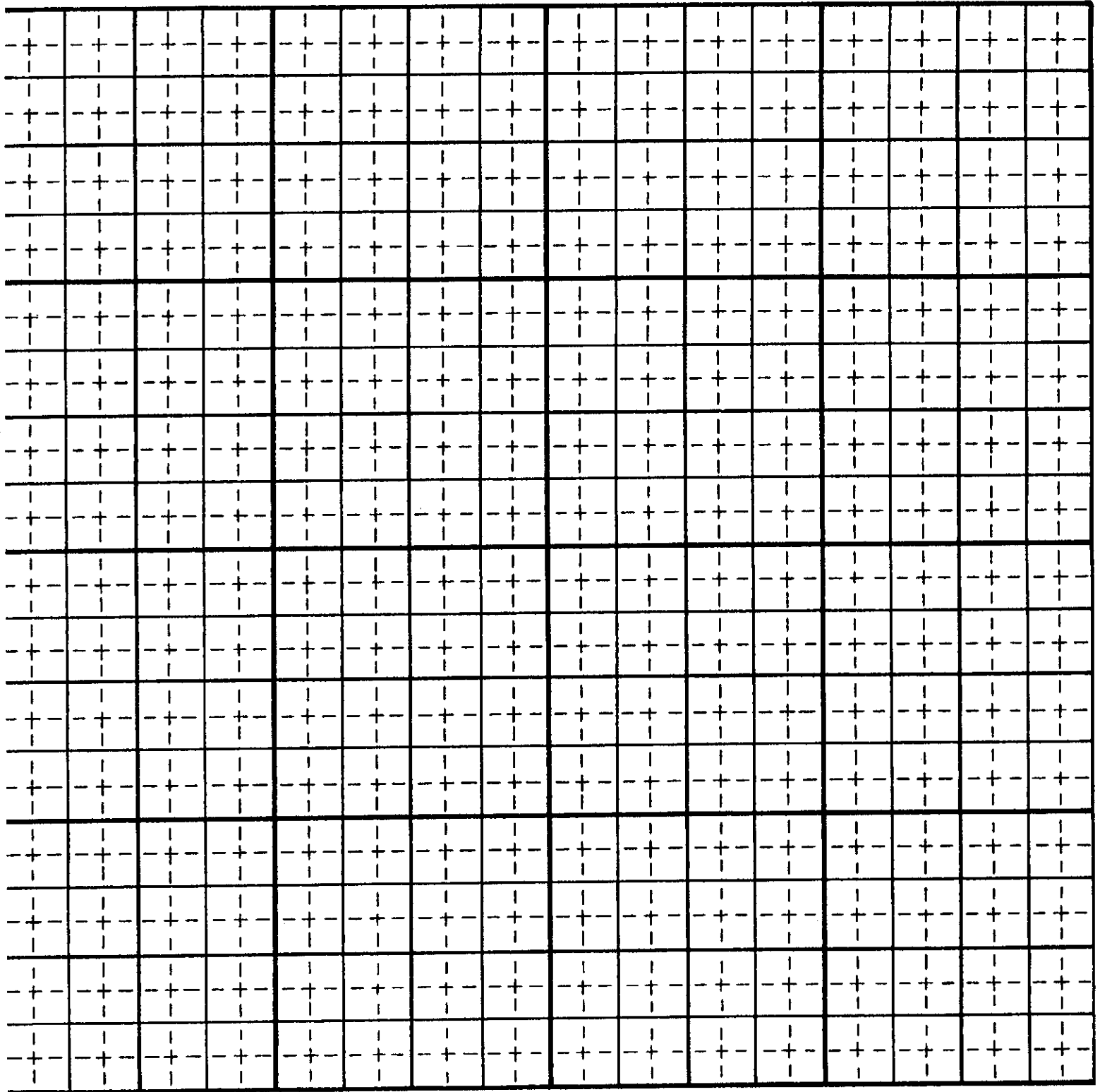
14. Remarks:

SW 1/4 17 Applicant is not quite sure what has happened to the well with subdivision and development. Use domestic well.

Last Name _____ Ident No. _____

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



Last Name _____ Ident No. _____

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

Date 7-19-04

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 19 day of July 10 2004

Notary Public Lori Harris

Residing at Boise, Idaho

My Commission Expires 12-8-06

Please Print Name

17. Notice of Appearance

Notice is hereby given that _____ 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 _____

Copies White-State, Yellow-Claimant

View1

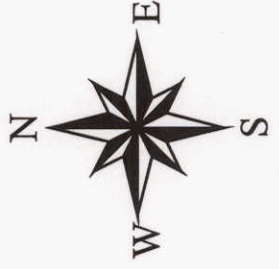
63-3515

Rhodes

-P/u



Ada taxlots
GCDB04N01W GCDB



0.2 Miles

0.1

0

0.1

