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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 25-194B
Date Received: 8/31/2004
Receipt No:
Received By: MWH

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

WAYNE C COOPER Phone: (208)523-0399
6185 E RIRIE HWY
IDAHO FALLS ID USA 83401

ARLENE B COOPER Phone: (208)523-0399
6185 E RIRIE HWY
IDAHO FALLS ID USA 83401

2. Date of Priority: 05/01/1888

3. Source: WILLOW CREEK Trib. to: SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
03N	39E	21	SW NW	BONNEVILLE	

5. Description of diverting works:

HEADGATES WITH DITCH SYSTEM FOR FLOOD IRRIGATION.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	11/01	4.8	
STOCKWATER	04/01	11/01	0.02	

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

8. Total consumptive use:

9. Non-irrigation uses:
S/40 BEEF CATTLE.

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
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03N	38E	19	SE	NE	IRRIGATION	3
			NE	SE	IRRIGATION	35
			NW	SE	IRRIGATION	32
					Section Acres	70
03N	38E	20	SW	NW	IRRIGATION	6
			NW	SW	IRRIGATION	13
					Section Acres	19
					Total Acres	89

11. Place of use in counties: BONNEVILLE

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

13. Other Water Rights Used:

14. Remarks:

THIS CLAIM ORIGINALLY FILED AS CLAIM NO. 25-194.

FLOOD RIGHT.

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 _____