

RETURN BY NOV 25, 1988
\$420 E.O.
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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: A22-00064
Date Received: 10/05/1988
Receipt No: E003942
Received By: TO

RECEIVED

NOV 9 1988

Department of Water Resources
Eastern District Office

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOHN BAGLEY
Address: P.O. BOX 122
REXBURG, ID

208-356-7926

83440

2. Date of Priority: JAN 22, 1916

3. Source: HORSE^{OK}SHOE CREEK

Trib. to: TETON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
05N	44E	15	NE	SW	SE		TETON

5. Description of diverting works:
PUMP AND SPRINKLER SYSTEM.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/15	10/15	8.000		

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

A.F.A.

8. Total consumptive use is 748.0 Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
05N	44E	15	SW	NE		IRR	26.0
			SE	NE		IRR	40.0
			NE	SE		IRR	38.0
			NW	SE		IRR	40.0

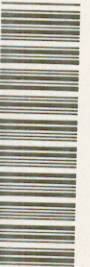
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Page

1

Date: 10/05/88

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10. Place of Use: Continued

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
05N	44E	15	SW		SE		IRR	40.0
			SE		SE		IRR	38.0
			Section Acres					222.0
		22	NE		NE		IRR	38.0
			NW		NE		IRR	36.0
			SW		NE		IRR	36.0
			SE		NE		IRR	38.0
			Section Acres					148.0
			Total Acres					370.0

11. Place of use in counties: TETON

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

13. Other Water Rights Used:
22-02082A

14. Remarks:

15. Basis of Claim: DECREED
Case Number:
Court :
Decree date:

F. C. GILLETTE
Decree Plaintiff

vs

LYNN CRANDALL, W. M.
Decree 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: 1

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): [Signature] Date: 10-5-88

Date: _____

State of Idaho)
County of Madison) SS.

Subscribed and sworn (or affirmed) before me this 5th day
of October 19 88

Karen Williams
Notary Public

Seal

Residing at Rigby ID
My Commission Expires 8-3-93

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