

RECEIVED
FEB 15 2005
IDAHO DEPARTMENT OF
WATER RESOURCES

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 37-12978
Date Received: 9/6/1988
Receipt No: S002058
Received By: AKC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

ROBERT CRUMRINE Phone: (208)837-9047
562 POPLAR ST
BLISS ID USA 83314

2. Date of Priority: 01/01/1882

3. Source: SPRING Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
06S	13E	27	NE SW	GOODING	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1/01	12/31	0.02	
AESTHETIC	1/01	12/31	0.02	

7. Total Quantity Appropriated is:
0.04 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
06S	13E	27	NE SW	DOMESTIC	
			NE SW	AESTHETIC	

11. Place of use in counties: GOODING

AMENDED

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

13. Other Water Rights Used:

14. Remarks:

Change of ownership entered 2-14-2005. After the change of ownership, the point of diversion and place of use was amended to reflect the correct legal description. kkc

PREVIOUSLY CLAIMED WR#A37-04245, WHICH BELONGS TO JOSEPH CLINE, AND WAS ALSO CLAIMED BY JOSEPH CLINE. AMENDED CLAIM WITH NEW NUMBER AND CURRENT INFORMATION FOR DAVID WILKINS. NEEDED TO FILE FOR BENEFICIAL USE STATUS RATHER THAN LICENSE STATUS BECAUSE NO PREVIOUS FILING EXISTED FOR SPRING UNDER WILKINS NAME.

15. Basis of Claim: Beneficial Use

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:

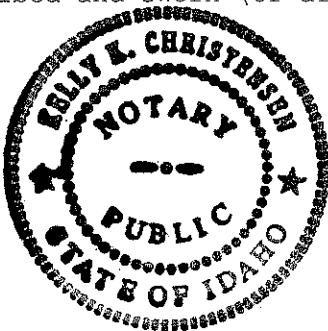
I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Robert Cummings Date: 2-14-05

Date: _____

State of Idaho)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 14th day of February 2005



Kelly K. Christensen
Notary Public

Residing at _____ Twin Falls, ID

My commission Expires 4-2-2010