

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: A22-00300D
Date Received: 9/26/1988
Receipt No: X777777
Received By: EMC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ^{OK} . HORSESHOE CREEK ASSN INC 208-354-8421
Address: PO BOX 546
DRIGGS, ID 83422

2. Date of Priority: JUN 1, 1900

3. Source: HORSESHOE CREEK Trib. to: TETON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
05N	44E	22	NW	SW	SE		TETON

5. Description of diverting works:
PUMPED FROM CREEK SPRINKLER IRR.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/15	10/15	1.344		

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

8. Total consumptive use is 268.7 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
05N	44E	22	NE	SE		IRR	40.0
			NW	SE		IRR	30.0
			SW	SE		IRR	24.4
			SE	SE		IRR	40.0

A22-00300D

Page 1

Date: 01/31/91

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10. Place of Use: Continued

Section Acres 134.4

Total Acres 134.4

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:
A22-00298E & A22-00299E

14. Remarks:
SPLIT OF RIGHT 22-0300
NOTICE IS RESULT OF CHANGE IN OWNERSHIP FOR A PORTION OF
A22-00300A, PAID FOR UNDER M001430. EMC 1-31-91

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date: 4/17/1933

MEWELL MADSEN

Decree Plaintiff

vs

R. G. MIEKLE

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: _____

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 _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

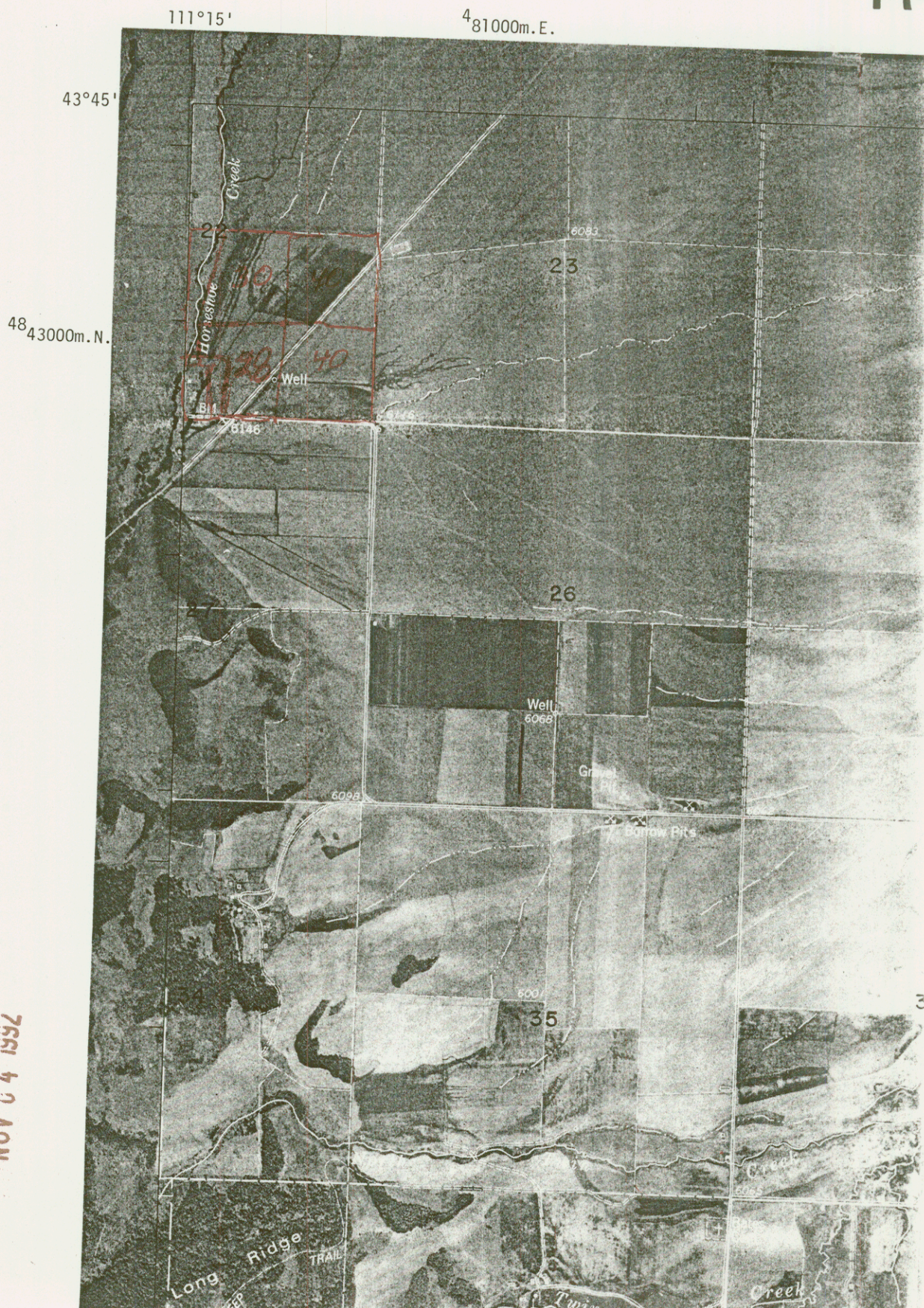


State of Idaho
DEPARTMENT OF WATER RESOURCES

A 22-0 0300A

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

R4



T5N

T4N

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