

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: A22-00208C

Date Received: 10/ 6/1988

Receipt No: X777777

Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOHN MARCHANT 619-565-0758
Address: 8858 HALSTED STR.
SAN DIEGO, CA 92123

AND

Name: NORMA MARCHANT 619-565-0758
Address: 8858 HALSTED STR.
SAN DIEGO, CA 92123

2. Date of Priority: JAN 18, 1905

3. Source: SOUTH LEIGH CREEK Trib. to: TETON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
06N	46E	31		SW	NW		TETON
				NE	SE		TETON

5. Description of diverting works:
TWO DITCHES TO FLOOD IRRIGATION

6. Water is used for the following purposes:

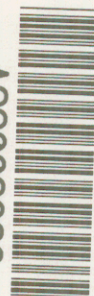
Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/01	12/01	0.794		

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

8. Total consumptive use is 80.0 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

A2200208C



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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06N	45E	36	SE	SW		IRR	40.0
Section Acres							40.0
Total Acres							40.0

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:
NONE

14. Remarks:

CLAIM A22-00208 SAYS 6.30 CFS USED . THE AMT. CLAIMED ON THESE TWO CLAIMS EXCEEDS THE ORIGINAL DECREED AMOUNT.

**NOTICE IS RESULT IN CHANGE OF OWNERSHIP FOR A PORTION OF A22-00208B, PAID FOR UNDER RECEIPT E002933 - 8-6-91/JT

15. Basis of Claim: DECREED

Water Right Number: 220208

Case Number:

Court :

Decree date: 12/16/1910

REXBURG IRRIG. CO.
Decree Plaintiff

TETON IRRIG. CANAL
vs 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: _____

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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 _____

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