

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

Renumbered to A22-00555A 1/25/92

Ident. Number: ~~A22-00055A~~ SC

Date Received: 10/ 7/1988

Receipt No: E002980

Received By: _____

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name:	CHARLES TICE	307-733-8869
Address:	PO BOX 8999	
	JACKSON WY	83001
AND/OR		
Name:	CHRISTOPHER TICE	307-733-8869
Address:	PO BOX 8999	
	JACKSON WY	83001
AND/OR		
Name:	NANCY JONES	307-733-8869
Address:	PO BOX 8999	
	JACKSON WY	83001
AND/OR		
Name:	CARMEL TICE	307-733-8869
Address:	PO BOX 8999	
	JACKSON WY	83001

A2200555A



2. Date of Priority: JUN 1, 1903

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

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
06N	45E	33	NW	SW	NE		TETON
			SE	NW	NW		TETON
			NE	SW	NW		TETON

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5. Description of diverting works:
HEADGATES IN STREAM TO DITCHES FOR FLOOD IRRIGATION

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/15	10/15	0.500		

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

A.F.A.

8. Total consumptive use is 140.0 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06N	45E	33	NW	NW		IRR	30.0
			SW	NW		IRR	40.0
Section Acres							70.0
Total Acres							70.0

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:
22-0054,7008

14. Remarks:
SPLIT BY OWNERSHIP

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date: 12/16/1910

REXBURG IRR. CO. ET AL
Decree Plaintiff

TETON IRR. CANAN CO. ET AL
vs Decree Defendant

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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: _____

~~NOV 04 1992~~

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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~~NOV 04 1992~~