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AUG 25 2005

DEPARTMENT OF
WATER RESOURCESIN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEMCIVIL CASE NUMBER: 39576
Ident. Number 75-14236
Date Received 8-2-05
Receipt Number C078740

d.o. no 973-05

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SEP 02 2005

Department of Water Resources

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAWRECEIVED
AUG 12 2005
DEPARTMENT OF
WATER RESOURCES

Please type or print clearly

1. Name of Claimant (s) JAMES R TAPPEL OR CATHERIN Phone (208) 756 4594Mailing Address PO Box 15 CARMEN ID Zip 834622. Date of Priority (Only one (1) per claim) 4/1/19153. Source of water supply (a) CARMEN CREEK
which is tributary to (b) SALMON RIVER4. a. Location of existing point of diversion is: Township 22N Range 22E Section 35,
1/4 of NE 1/4 of NE 1/4, Govt. Lot, B.M., County of LEMHIAdditional points of diversion if any: ~~DITCH AND HEADGATE~~ CRT

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well. DITCH FROM CARMEN CREEK

6. Water is claimed for the following purposes:

For Stock Water IRRIGATION ORT purposes from 4/01 to 11/01 amount 0.1 (cfs) or _____ (acre feet)
 For _____ purposes from _____ to _____ amount _____ or _____
 For _____ purposes from _____ to _____ amount _____ or _____
 For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.1 CFS (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) STOCKWATER 3 SHEEP 2 HORSES

10. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
22N	22E	3			ORT	ORT													4.2 <u>ORT</u>
					3.1	2.1													

Total number of acres irrigated 4.2

11. In which county (ies) are lands listed above as place of use located? LEMMING

12. Do you own the property listed above as place of use? Yes X No _____
 If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
A75 10062H, 10061J, 00669F, 00070F 10062H or None ()

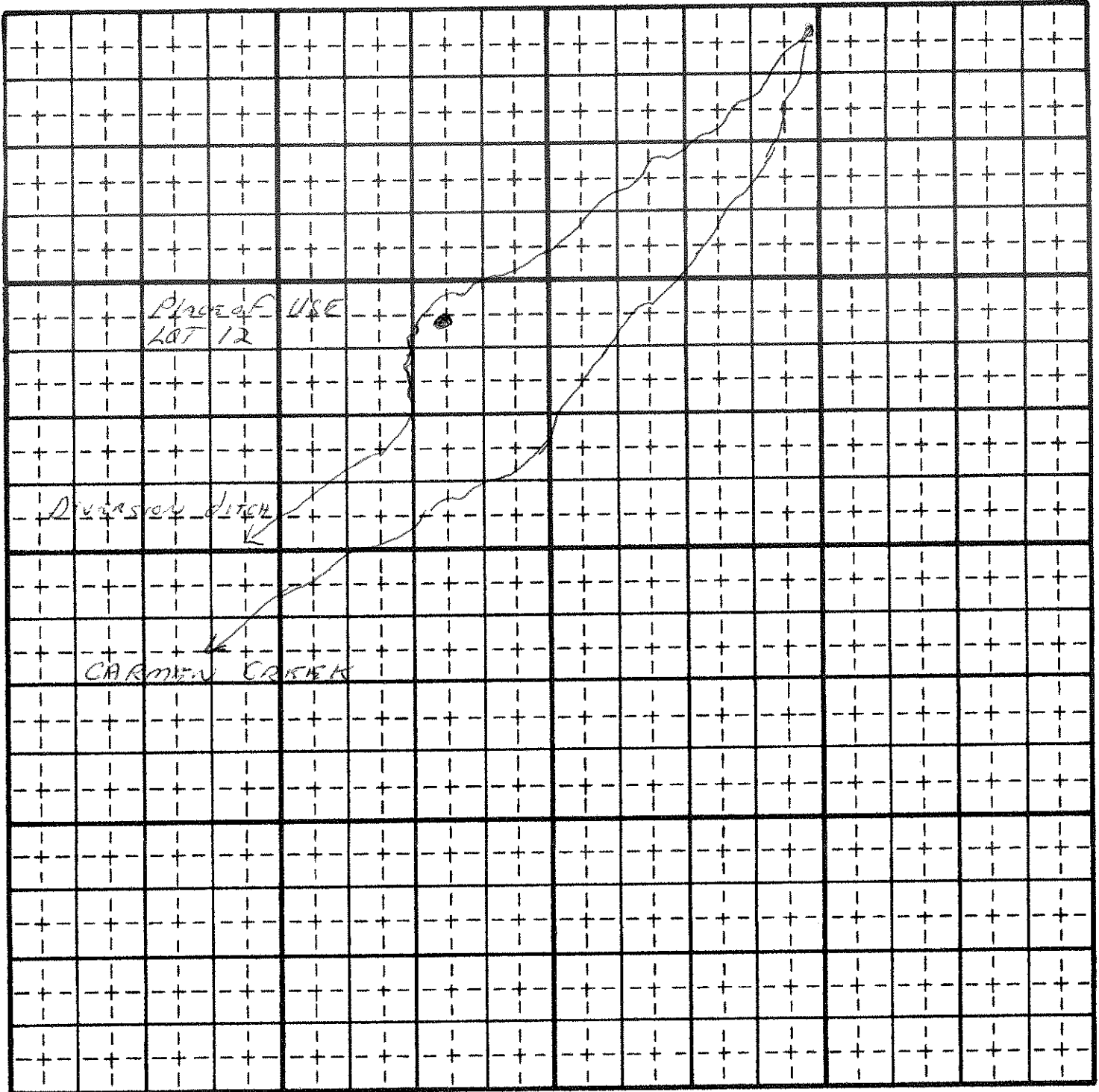
14. Remarks: THIS IS A RIGHT SPLIT FROM FORMER RIGHT
75-14047.
ADDRESS OF USE IS 70 PARMENTER RD CARMEN IDAHO

Last Name TIPPETT Ident No. 75-14236

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile

NE 1/4 of NE 1/4
S10 35 R 22 E T 23 N
POINT OF DIVERSION



Last Name TIPPETT

Ident No. 75-14236

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____
Decree _____
If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs 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 do solemnly swear or affirm that the statements contained in the foregoing document are true
and correct.

Signature of Claimant (s) _____

Date 29 JULY 05

James R. Tippet
Catherine T. Tippet

Date July 29, 2005

For Organizations: I do solemnly swear or affirm that I am _____

Title

of _____, that I have signed the foregoing
Organization

document in the space below as _____ of _____
Title Organization

and that the statements contained in the foregoing document are true and correct.

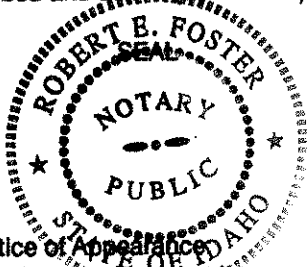
Signature of Authorized Agent _____

Title and Organization _____

Date _____

State of Idaho/or _____)
County of Lemhi) SS.

Subscribed and sworn (or affirmed) before me this 29th day of July 18 2005



Notary Public Robert E Foster

Residing at Salmon Id

My Commission Expires 02-16-07

Please Print Name

17. Notice of Appearance
Notice is hereby given that _____ will be acting as attorney at law on behalf
of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above
should be mailed to me at the address listed below.

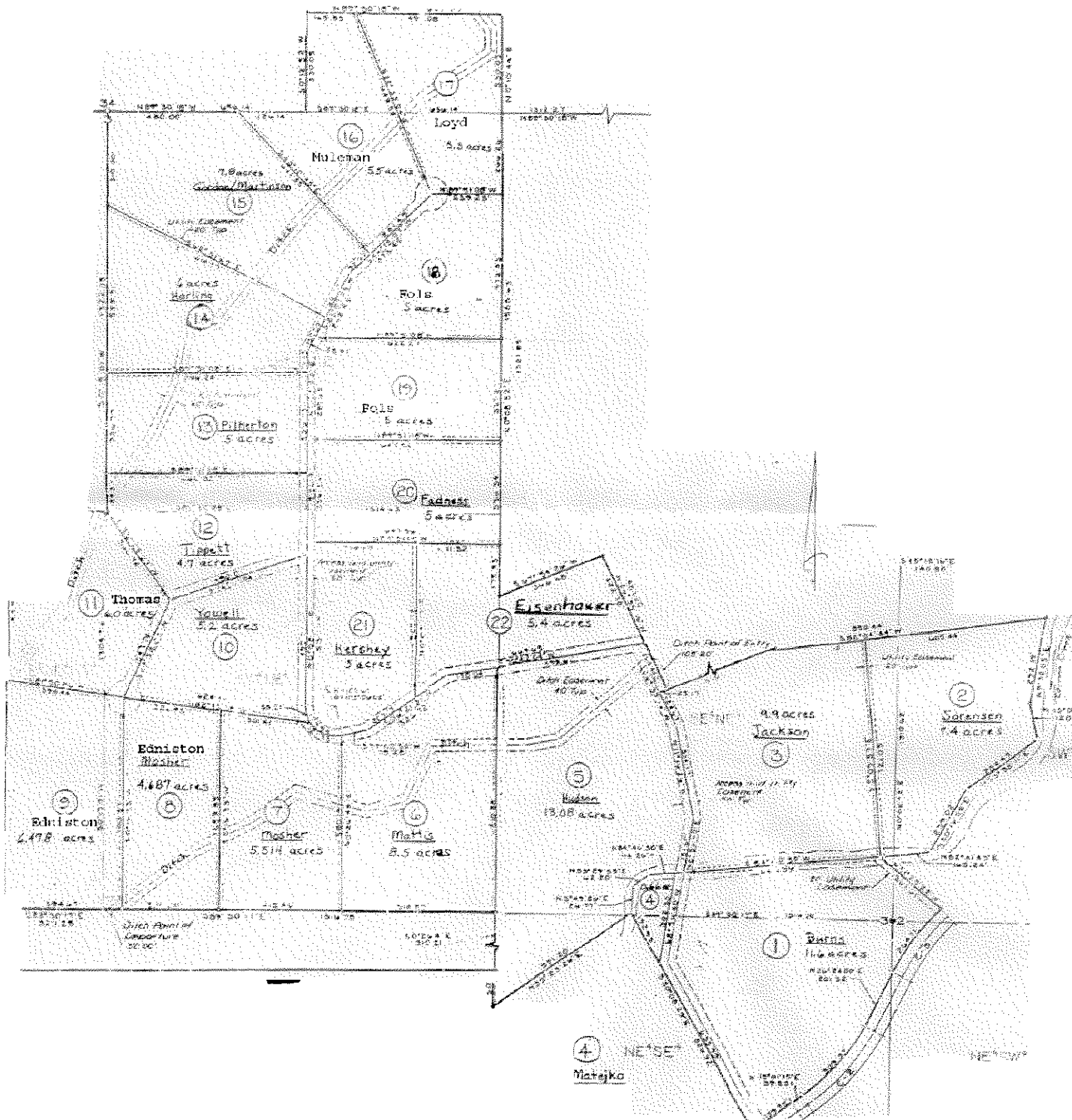
Signature _____

Address _____

Date _____

Last Name TIPPETT Ident. Number 7514236

AJAX PEAK



Lot 12 Ajax Subdivision

TIPPETT

75-14236