

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: **A22-12205**
Date Received: 10/ 6/1988
Receipt No: E002964
Received By: _____

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

1. Name: C TIMOTHY HOPKINS 208-523-4445
Address: P.O. BOX 51219
IDAHO FALLS ID 83405-1219
OR
Name: CLYDE J NORD
Address: IDAHO FALLS ID 83405-1219

2. Date of Priority: AUG 1, 1904

3. Source: UNNAMED CREEKS Trib. to: TETON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
05N	45E	20	SW	SW	SW		TETON
				NW	SE		TETON
		29		NW	NE		TETON

5. Description of diverting works:

EARTH,BRUSH,BOARD DAMS;DIVERTED SYS./DITCHES/IRRI. WELL 15' DEEP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/15	10/15	2.800		
STOCKWATER	01/01	12/31	0.020		
DOMESTIC	01/01	12/31	0.020		

7. Total Quantity Appropriated is:

2.840 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 264.1 Acre Feet Per Annum.

9. Non-irrigation uses:

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NOV 06 1988

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APR 11 1994

10. Place of Use:

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
05N	45E	20	NW		SW		DOMEST	
			NW		SW		IRR	35.0
			SW		SW		IRR	38.0
							Section Acres	73.0
		29	NW		NW		IRR	39.0
			SW		NW		IRR	30.0
							Section Acres	69.0
							Total Acres	142.0

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:

SUBIRRIGATION IS UTILIZED FOR PASTURE GROUND

14. Remarks:

15. Basis of Claim: DECREED

Case Number: 1847

Court :

Decree date: 9/ 8/1986

Decree Plaintiff

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: _____

NOV 06 1990

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~~APR 11 1994~~

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 _____

17. Notice of Appearance:

Notice is hereby given that I, _____ will be
Print Name

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 _____

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NOV 06 1993

~~MICROFILMED~~
~~APR 11 1994~~