

JAN 19 2006
RECEIVED
JAN 19 2006
DEPARTMENT OF
WATER RESOURCES

DISTRICT COURT-SRBA Fifth Judicial District County of Twin Falls - State of Idaho	
JAN 18 2006	
By _____	Clerk
_____	Deputy Clerk

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re SRBA	)	Subcase: 36-16377
	)	
Case No. 39576	)	ORDER GRANTING MOTION TO FILE
	)	LATE NOTICE OF CLAIM
_____	)	

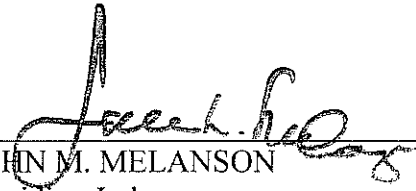
On September 6, 2005, James A. Ward, filed a *Motion to File Late Notice of Claim* for the above-captioned water right. Hearing was held on the *Motion* on January 17, 2006. This *Motion* complied with all procedural requirements under **SRBA Administrative Order 1**, and no objections were made to this late Notice of Claim.

THEREFORE, IT IS ORDERED, that the *Motion to File a Late Notice of Claim* for water right 36-16377 is **granted**.

The original Notice of Claim, as well as any attached filing fees, and a copy of this **Order** will be forwarded to the Idaho Department of Water Resources for further action.

IT IS SO ORDERED.

Dated January 18, 2006.



JOHN M. MELANSON
Presiding Judge
Snake River Basin Adjudication

CERTIFICATE OF MAILING

I certify that a true and correct copy of the ORDER GRANTING
MOTION TO FILE LATE NOTICE OF CLAIM was mailed on January 18,
2006, with sufficient first-class postage to the following:

DIRECTOR OF IDWR
PO BOX 83720
BOISE, ID 83720-0098

JAMES A WARD
278 E 600 S
JEROME, ID 83338
Phone: 208-731-1914

ORDER

Page 1 1/18/06

FILE COPY FOR 01906

Deputy Clerk

A handwritten signature in cursive script, appearing to read "Julie Murphy", is written over a horizontal line. The signature is fluid and stylized, with the first and last names being clearly legible despite the cursive style.

IN 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 SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 36-16377Date Received 1-19-06Receipt Number CO80113NOTICE OF CLAIM
TO A
WATER RIGHTACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) James A Ward Phone (208) 731-1914Mailing Address PO Box 5842 Twin Falls Id Zip 833032. Date of Priority (Only one per claim) Aug 04 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 9S Range 17ESection 16, 1/4 of SE 1/4 of SE 1/4, Govt. Lot _____, BM.,County of Jerome

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate 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. well latars

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For Dr purposes from Jan 1 to Jan amount .04 (cfs)
(Both dates are inclusive)For Dr purposes from 315 to 1115 amount .047. Total quantity claimed .08 cfs (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 1 Horse

10. Place of use is: Township: 3E 5N 17E S16 Range 5
Section 1, 1/4 of 1/4, Govt. Lot 1, B.M.,
County of Jerome for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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

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.
None

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree
Court _____ Decree Date _____ Plaintiff vs Defendant _____
If applicable provide IDWR Water Right Number _____

16. Signature (s)
(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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.

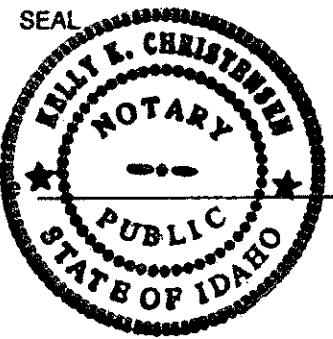
Signature of Claimant (s) [Signature] Date 7-6-05
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
document in the space below as _____ Organization _____
_____ Title _____ of _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____
Title and Organization _____

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

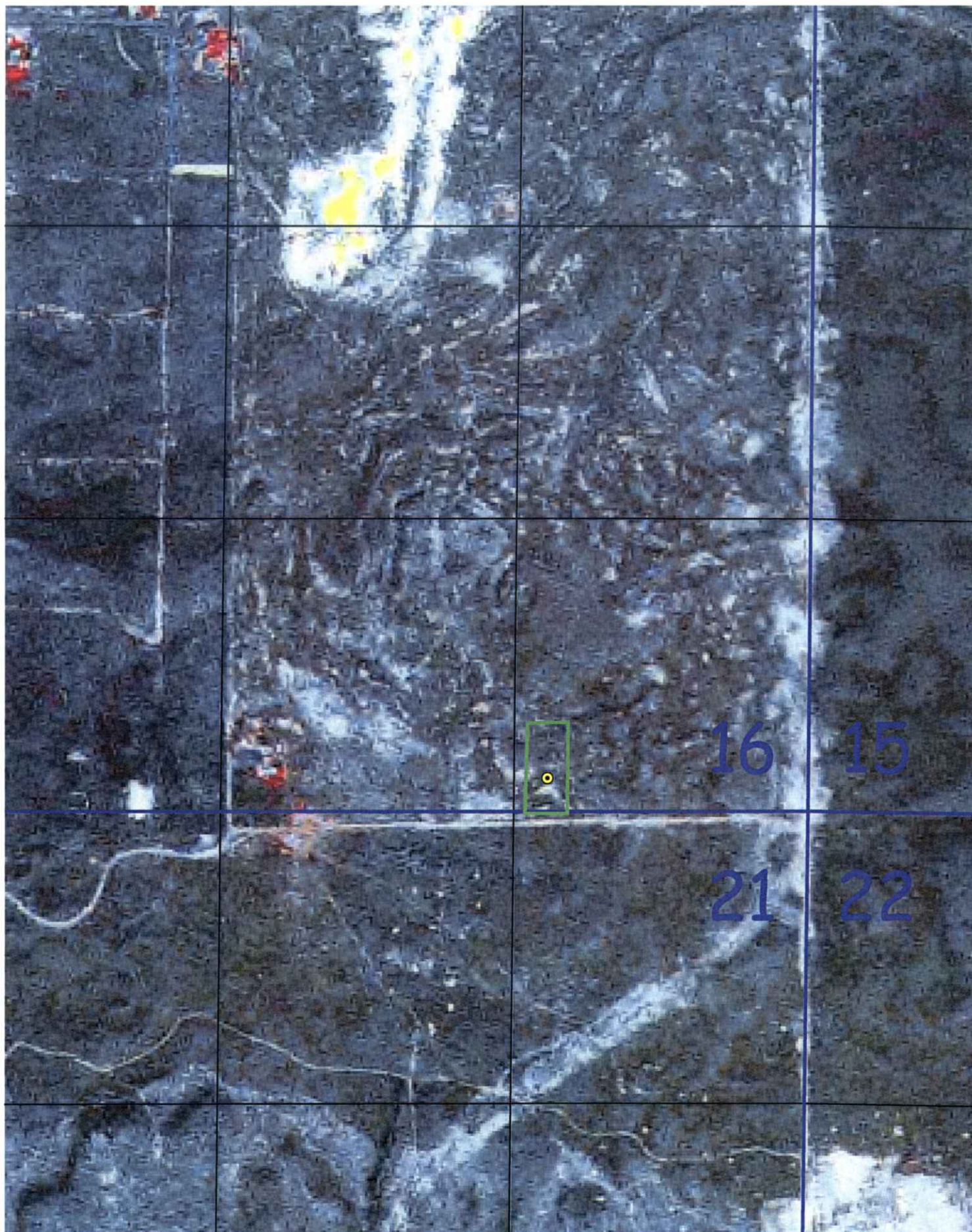
Subscribed and sworn (or affirmed) before me this 6th day of Sept 20
1905



Notary Public Kelly E. Christensen
Residing at Thrin Falls, ID
My Commission Expires 4-2-2010

Last Name _____ Ident No. _____

Ward Groundwater Claim





State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037 DEPT INTERNET WEB SITE: www.idwr.idaho.gov

SOUTHERN REGION

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

RE: SNAKE RIVER BASIN ADJUDICATION (SRBA) CLAIM(S): 36-16377

To Whom It May Concern:

The filing fee for this SRBA claim is \$25.00.

Sincerely

Amanda J Kriwox

Water Resource Agent

E-mail address: Amanda.Kriwox@idwr.idaho.gov

Enclosures

Payment Amount \$25.00
 Date Received 1/19/2006 12:48:07 PM
 Region State
 Status
Payment Type Check
 Check Number 1220

Payer	THE WOODY LINK LIVING TRUST
Comment	NOTICE OF CLAIM

Fee Detail

Amount	Description	Fund	FD	PCA	SO
\$25.00	ADJUDICATION FILING FEE	0337		41503	1155

Signature Line (Dept. Representative)