

**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 29-2385

Date Received 1-11-02

Receipt Number E027371

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

(AMENDED)

RECEIVED

DEC 13 2001

Department of Water Resources
Eastern Region

Please type or print clearly

1. Name of Claimant (s) City of Chubbuck Phone (208) 237-2430Mailing Address PO Box 5604/5160 Yellowstone, Chubbuck, ID Zip 832022. Date of Priority (Only one (1) per claim) January 11, 19573. Source of water supply (a) groundwater
which is tributary to (b) _____4. a. Location of existing point of diversion is: Township 6 S. Range 34 E. Section 11,
NE 1/4 of NW 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of BannockAdditional points of diversion if any: none

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. vertical turbine pump and motor
diverting water directly into the distribution system. Well No. 1

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For municipal purposes from Jan. 1 to Dec. 31 amount .78 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .78 (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.) municipal domestic - 2806 households

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.

- WITHIN THE CITY LIMITS OF THE CITY OF CHUBBUCK

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	

Total number of acres irrigated _____

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

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.

29-2413, 29-2469, 29-7624, 29-08188 or None ()

14. Remarks:

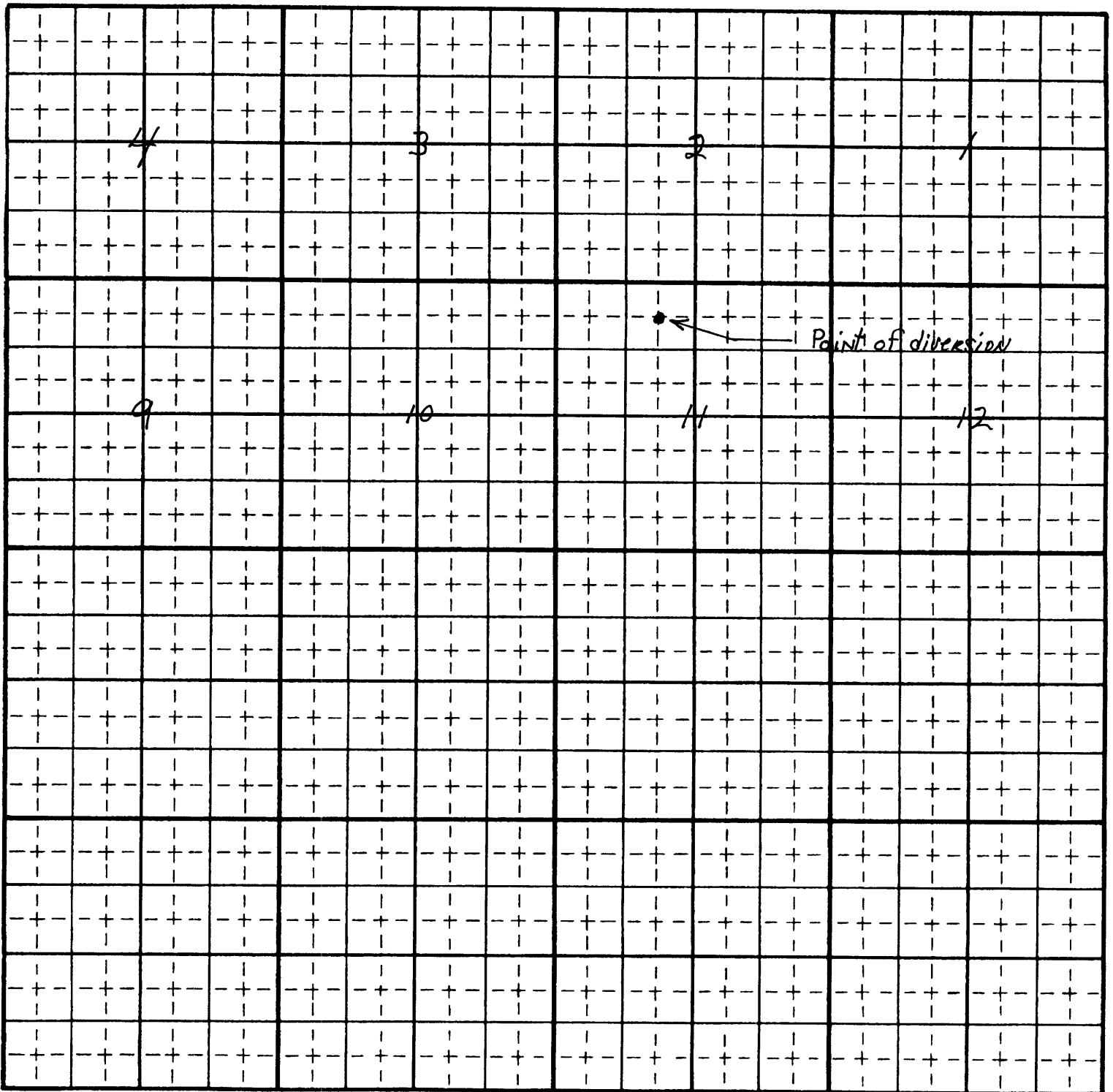
The purpose of this amended claim is to raise the claimed rate
of .56 cfs to match the licensed rate of .78 cfs.

Last Name _____ Ident No. _____

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, NW 1/4, Sec. 11, T. 6 South, R. 34 East



Last Name _____ Ident No. _____

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License X Permit _____
Decree _____
If applicable provide IDWR Water Right Number 29-2385
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 _____
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Mayor _____
Title _____
of _____ City of Chubbuck _____, that I have signed the foregoing
Organization _____
document in the space below as _____ Mayor _____ of _____ City of Chubbuck _____
Title _____ Organization _____

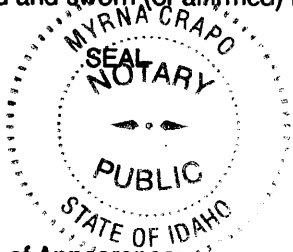
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Mayor, City of Chubbuck _____ Date Nov. 15-2001

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

Subscribed and sworn (or affirmed) before me this 15 day of November 19 2001



Notary Public _____

Residing at _____

My Commission Expires _____

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, THOMAS J. Holmes 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 _____

Ident. Number _____

Chubbuck, City of 29-2385