

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 29-02469

Date Received 1-11-02

Receipt Number 6027371

Amended

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

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) 237-2430

Mailing Address PO Box 5604 / 5160 Yellowstone Chubbuck, Zip 83202

ID

2. Date of Priority (Only one (1) per claim) March 10, 1963

3. Source of water supply (a) groundwater

which is tributary to (b)

4. a. Location of existing point of diversion is: Township 5 S. Range 34 E. Section 34

NW 1/4 of SW 1/4 of 1/4, Govt. Lot, B.M., County of Bannock

Additional points of diversion if any:

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 lineshaft, turbine pump
and motor diverting water directly into the distribution system

Well No. 3

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 2.69 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 2.69 (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.
29-2385, 29-2413, 29-7624, 29-08188 or None ()

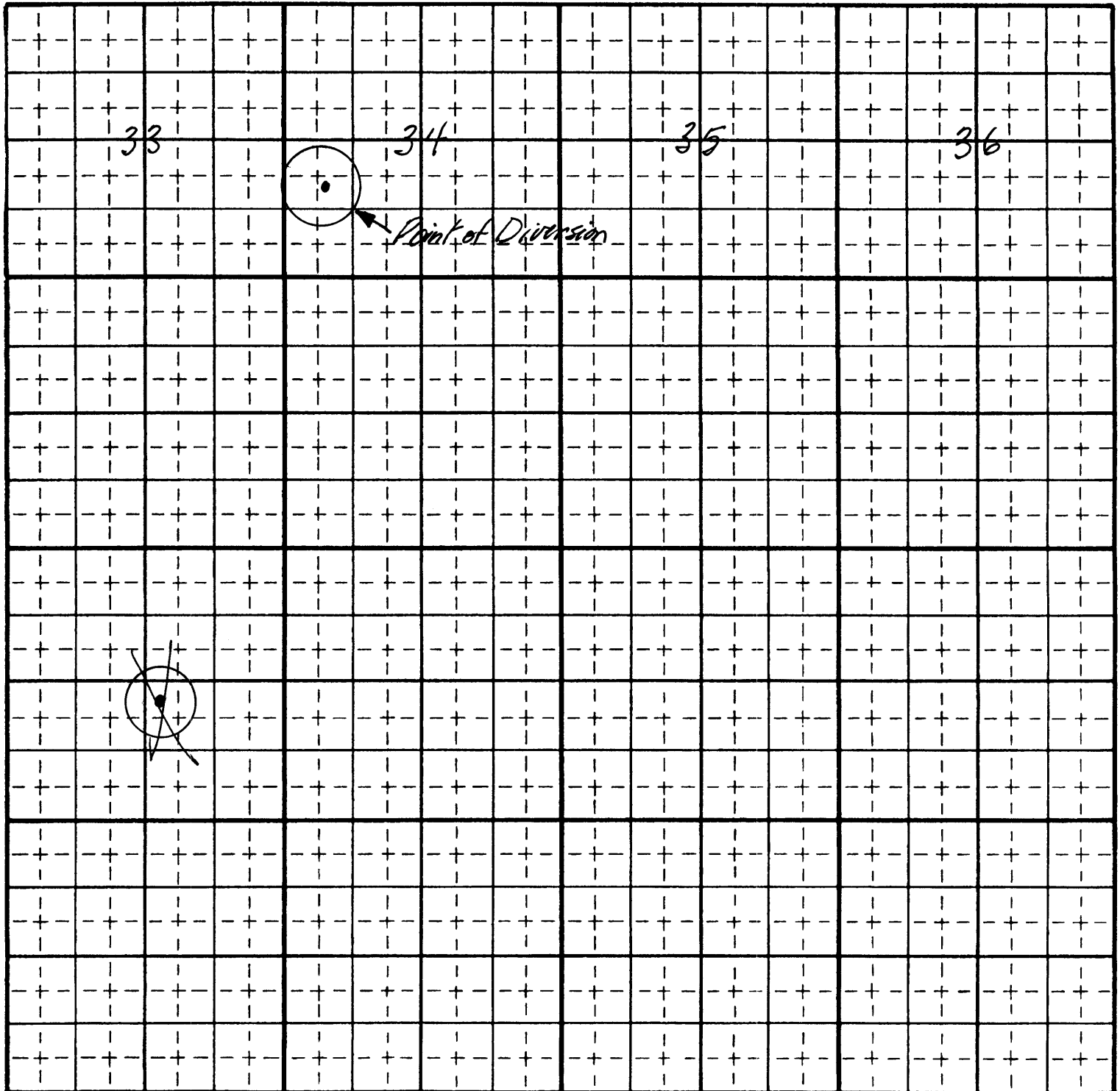
14. Remarks: The purpose of this requested "Beneficial Use" is to bring the
licensed rate 1.11 cfs up to the claimed rate of 3.80 cfs of
water right #29-2469 or an INCREASE of 2.69 cfs as an additional
diversion rate over the original license. (see attachment for
evidence of priority)

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

T. 5 South, R. 34 East, BM



Last Name _____ Ident No. _____

15. Basis of Claim (check one) Beneficial Use X 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 _____
_____ Date _____

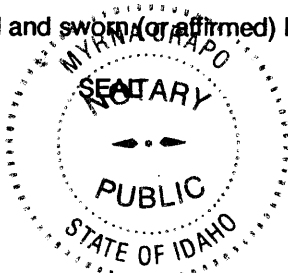
For Organizations: I do solemnly swear or affirm that I am _____ Mayor _____ Title _____
of _____ City of Chubbuck _____, that I have signed the foregoing
Organization
document in the space below as _____ Mayor _____ of _____ City of Chubbuck _____
Title Organization
and that the statements contained 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 15th day of November 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 _____

AGRIC LTURAL SERVICES Inc.

Fertilizers

Pumps and Irrigation Equipment

Phone SU 5-1717

P. O. Box 627

Blackfoot, Idaho

WELL TESTING REPORT AND AGREEMENT

There for all well testing to be cash upon completion of test

NAME Barnack Real Estate LOCATION Prosser DATE Dec 21, 1962

I.D. Well 16" x 12" Well Depth _____ Amount of Casing in Well _____

Static Water Level 70' Will Well Pump Sand? _____ Orifice Size 10 x 12

Bowl Capacity Max _____ Discharge Pipe to Use _____ Size of Col. & Length 10 x 155'

Time	Water Level Ft. from Top	R.P.M.	Orifice Reading Inches	G.P.M.	Minor Inches	Remarks — Sand? Cascading Water? etc.
after 7:00 pm						
12:10	83	1475 1500	16 1/2	2000	222 280	clean sanding or backflush
12:20	97 1/2	1700	29	2650	294	
after 1:10 pm	102 1/2	2000	37	3002	334	
1:25	75'	1400	5	1100	122	clean & soft
1:30	80'	1350	10"	1560	173	" "
1:35	84'	1450	16 1/4"	1975	208	" "
1:45	89	1600	26 1/2	2232		
1:50	95	1800	27	2545		

A minimum charge of \$_____ for installing and pulling test pump, \$_____ for one hour engine time, plus \$_____ per hour for each succeeding hour of engine time. An additional charge of \$_____ per foot for 8" column or smaller, or \$_____ per foot for 10" column will be charged for every foot over 200'.

\$_____ Plus \$_____ Plus \$_____ Plus \$_____ Equals \$_____
(Column Setting) (1st Hr. Engine) (Hrs. @ \$_____) (Mileage) (Total Minimum Charge)

Without grace for value received, I promise to pay to the order of the Agricultural Services, Inc., the above mentioned amounts, payable upon completion of well test. I also agree that if this note be placed with an attorney for collection or suit, I agree to pay a reasonable attorney's fee. If not paid at maturity, this note shall thereafter draw interest at the rate of eight per cent (8%) per annum until paid. Agricultural Services, Inc., will in no way be held liable for any damage or loss to customer's well that may occur during well testing.

APPROVED BY:

(Owner of Well)

(Date Well Tested)

PROVED BY:

(Agricultural Services, Inc.)