

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

429-07252

Date Received

4-18-90

Receipt Number

E013311

FILED TOGETHER

29-7169

29-7252

NOTICE OF CLAIM
TO A

WATER RIGHT

ACQUIRED UNDER STATE LAW

RECEIVED

APR 18 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Merlin W. Blanchard. Phone (208) 254:3350Mailing Address 675 West Glover Drive, Id Zip 832142. Date of Priority (Only one (1) per claim) February 26, 19753. Source of water supply (a) Ground water
which is tributary to (b) _____4. a. Location of existing point of diversion is: Township 10 S Range 36 E Section 10,
_____ 1/4 of _____ 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.16" well case200' well300 HP Electric Turbine Pump.10 - 3" laterals10" - 8" Mainline

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Irrigation purposes from April 1 to Nov 1 amount 5.30 ^{CFS} or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 5.30 CFS (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 662.5 acre feet per annum.

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

10. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
10S	36E	10	37	37	36	40	15				~~20~~				20	38	40		265

Total number of acres irrigated 265

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 ☒ 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.
_____ or None ()

14. Remarks:

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Last Name Blanchard Ident No. 29-7252

Copies: White -State, Yellow-Claimant

Scale: 2 inches equals 1 mile

10 S 36 E Sec 10.

[illegible]

~~Microfilm~~

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Last Name Blanchard

Ident No. 29-72-52 Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License ☒ Permit _____
Decree _____
If applicable provide IDWR Water Right Number 29-2252
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.

X Signature of Claimant (s) Martin Blanchard Date 4/17/90

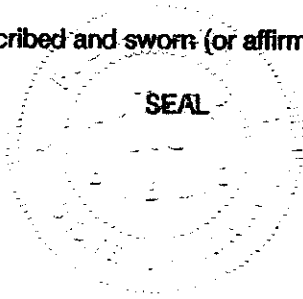
Date _____

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

Subscribed and sworn (or affirmed) before me this 17 day of April 1990



Notary Public Belva Olsen

Residing at McCammon, Id.

My Commission Expires 10-95

Please Print Name

17. Notice of Appearance:
Notice is hereby given that I, _____ 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 _____

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Last Name Blanchard Ident. Number 29-2252

Copies White-State, Yellow-Claimant