

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: A22-07375A
Date Received: 8/24/1988
Receipt No: E001699
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: EHCO RANCH INC.
Address: P.O. BOX 120
TETONIA, ID

208-356-6724

83552

2. Date of Priority: AUG 17, 1981

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
06N	40E	3		NW	SE	R	TETON
		10		SE	NW	R	TETON
		11		NE	NE		MADISON

5. Description of diverting works:
PUMP FROM RIVER TO SPRINKLER SYSTEM.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	05/01	10/15	7.330		

7. Total Quantity Appropriated is:
7.330 C.F.S. (and/or)

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:
NONE.

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
06N	44E	4	NW	SW		IRR	37.0

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10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06N	44E	4	SW	SW		IRR	36.0
					Section Acres		73.0
		5	NE	SW		IRR	40.0
			NW	SW		IRR	4.0
			SW	SW		IRR	4.0
			SE	SW		IRR	40.0
			NE	SE		IRR	40.0
			NW	SE		IRR	40.0
			SW	SE		IRR	40.0
			SE	SE		IRR	40.0
					Section Acres		248.0
		8	NE	NE		IRR	36.0
			NW	NE		IRR	35.0
			NE	NW		IRR	23.0
			NW	NW		IRR	1.0
					Section Acres		95.0
		9	NW	NW		IRR	31.0
					Section Acres		31.0
					Total Acres		447.0

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:
NONE.

14. Remarks:

15. Basis of Claim: LICENSE

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OCT 29 1992

(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.

For Organizations:

Signature of Authorized Agent

Date _____

Notary Public

Residing at Idaho Falls
My Commission Expires 6-94