

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 1-10483
Date Received: 12/22/1988
Receipt No: S005005
Received By:

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

1. Name of Claimant(s)

THE AMALGAMATED SUGAR CO Phone: (208)383-6500
3184 ELDER ST
BOISE ID USA 83705

2. Date of Priority: 05/01/1923

3. Source: SNAKE RIVER Trib. to: COLUMBIA RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
10S	23E	19	NE NE NE 1	CASSIA	

5. Description of diverting works:

PUMPING PLANT FROM RIVER.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	4/01	10/31	3.5	

7. Total Quantity Appropriated is:

3.5 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres	
10S	23E	19	NE	NE	1	IRRIGATION	30
			NW	NE	2	IRRIGATION	1
			SW	NE	2	IRRIGATION	15
			SE	NE		IRRIGATION	22
			NE	SE		IRRIGATION	5

Section Acres 73
Total Acres 73

11. Place of use in counties: CASSIA
12. Do you own the property listed above as place of use? Yes
13. Other Water Rights Used:
14. Remarks:

BURLEY FACTORY IRRIGATION.

This right is a split from former right 1-4045 .

15. Basis of Claim: Statutory Claim

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 Organizations:

I do solemnly swear or affirm that I am _____ of
Title

_____, that I have signed the foregoing

Organization
document in the space below as _____ of
Title

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

Signature of Authorized Agent

Title and Organization

Date

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____