

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 A36-07899
Date Received _____
Receipt Number 5010074 *Adm*

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

OCT 12 1989

Department of Water Resources
Southern Region Office

Please type or print clearly

1. Name of Claimant (s) City of Paul Phone (208) 438-4101
Mailing Address P.O. Box 13, Paul, Idaho Zip 83347

2. Date of Priority (Only one (1) per claim) February 27, 1980

3. Source of water supply (a) Groundwater
which is tributary to (b) _____

4. a. Location of existing point of diversion is: Township 9 S. Range 23 E. Section 28,
SE 1/4 of SW 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of Minidoka

Additional points of diversion if any: T. 9 S., R. 23 E., Section 32 NE 1/4 NW 1/4

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.

Two wells and two pumps

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Municipal purposes from 1/1 to 12/31 amount 1.510 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1.510 (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.) P/U within the city limits of Paul

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.

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	
9S.	23E	28	WITHIN CITY LIMITS OF PAUL																
		29																	
		32																	
		33																	

Total number of acres irrigated _____

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

12. Do you own the property listed above as place of use? Yes X No X

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.

36-04083 and 36-07206

or None ()

14. Remarks:

City of Paul owns some of the property located within the
city limits. The majority of the property is owned by
private land owners.

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Last Name City of Paul Ident No. _____

Copies: White -State, Yellow-Claimant

R. 23E

Hwy 27

38

37

T. 9S

Hwy 25

32

33

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Scale: 2 inches equal 1 mile.

Last Name City of Paul

Ident No. A36-07899

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License X Permit _____
Decree _____
If applicable provide IDWR Water Right Number 36-07899
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 _____ Attorney _____
Title _____
of _____ City of Paul _____, that I have signed the foregoing
Organization _____
document in the space below as _____ Attorney _____ of _____ City of Paul _____
Title _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____
Title and Organization _____ Attorney - City of Paul _____ Date 10/11/89

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

Subscribed and sworn (or affirmed) before me this 11th day of October 19 89

SEAL

Notary Public Sharon D. Janner

Residing at Rupert, Idaho

My Commission Expires 12/1/94

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, Kent Fletcher 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 Kent Fletcher

Address P.O. Box 910, Burley, Idaho 83318

Date 10/11/89

Last Name City of Paul Ident. Number _____

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