

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: **A22-00079H**
Date Received: 9/27/1988
Receipt No: X777777
Received By: _____

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

1. Name: KEVIN THIBEAULT 208-354-8143
Address: PO BOX 647
DRIGGS ID 83422
AND/OR
Name: DEB THIBEAULT 208-354-8143
Address: PO BOX 647
DRIGGS ID 83422

2. Date of Priority: JUN 1, 1902

3. Source: BUFFALO FLAT SPRINGS Trib. to: TETON RIVER

4. Point of Diversion: .

Township	Range	Section	1/4	of	1/4	of	1/4	Lot	County
05N	45E	35	SE		SW		NW		TETON
			SE		SE		NW		TETON
			SE		NE		SW		TETON

5. Description of diverting works:
CEMENT HDGATE DITCHES TO POU, AND WOOD DIVERSION HDGATE.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/15	10/15	0.460		

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

8. Total consumptive use is 57.5 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE



10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
05N	45E	35	NE	SW	IRR	20.0
			NW	SW	IRR	3.0
Section Acres						23.0
Total Acres						23.0

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:

PAID ON RECIEPT M001454

THIS RIGHT SPLIT FROM A22-00079E BECAUSE OF CHANGE IN OWNERSHIP.

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date: / /

DANIEL SORENSEN

Decree Plaintiff

LYNN CRANDALL. W.M.

vs Decree 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/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____

_____ Date: _____

State of Idaho)
) SS.
County of _____)

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____