

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

COPY

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 24-4018

Date Received _____

Receipt Number _____

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

1. Name of Claimant(s) Kevin Toner & Yodon Thonden Phone (212) 842-8903

Mailing Address 136 Madison Ave., 3rd Floor, New York, NY Zip 10016

2. Date of Priority (Only (1) per claim) May 1, 1919

3. Source of water supply (a) Crow Creek

which is tributary to (b) Salt River

4.a. Location of existing point of diversion is:
Township 9S Range 46E Section 29, SW 1/4 of NE 1/4 of NE 1/4, Govt. Lot _____,
County of Caribou

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. Headgate and Ditch

6. Water is claimed for the following purposes: _____ (Both dates are inclusive) (cfs) (acre feet)

For Irrigation purposes from 04/01 to 10/31 amount 0.06 cfs or _____

7. Total quantity claimed (a) 0.06 cfs (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.) _____
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 instruction for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				TLS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
9S	46E	21											3.2						3.2

Total number of acres irrigated 3.2

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

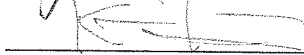
14. Remarks:

15. Basis of Claim (Check one) Beneficial Use ☒ Posted Notice ☐ Permit ☐ Decree ☐ License ☐
If applicable provide IDWR Water Right Number 24-4018
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

16. Signature(s)

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 7/30/07

 Date 7/30/07

For Organizations: I do solemnly swear or affirm that I am _____ of _____ (Title)

_____, that I have signed the foregoing document in the space below as (Organization)

_____, of _____ and that the statements contained in the (Title) (Organization)

foregoing document are true and correct.

Last Name Toner/Thonden Ident. Number 24-4018

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho)
) SS.
County of New York)

Subscribed and sworn (or affirmed) before me this 30 day of JULY, 2007.

Notary Public JESSICA FLORES (CALDERON)
Residing at Notary Public, State Of New York
My Commission Expires No. 01FL6149342
Qualified in Queens County
Commission Expires July 10, 2010

17. Notice of Appearance:

Notice is hereby given that I, Kent W. Foster, 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: 1000 Riverwalk Dr., Ste. 200, PO Box 50130, Idaho Falls, ID 83405-0130

Date _____