

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 22-13461
Date Received: 1/11/2006
Receipt No: *22-13461*
Received By: *JAC 1/12/06*
ENLARGEMENT

ENLARGEMENT

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

1. Name of Claimant(s)

VAL E SCHWENDIMAN Phone: (208)458-4261
9633 E HWY 33
NEWDALE ID USA 83436

2. Date of Priority: 07/20/1960

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
06N	41E	2	SE NW	MADISON	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	10/31	0.3	52.5

7. Total Quantity Appropriated is:
0.3 C.F.S. and/or 52.5 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres	
06N	41E	2	NE	NW	3	IRRIGATION	23
			NW	NW	4	IRRIGATION	33
			SW	NW		IRRIGATION	38
			SE	NW		IRRIGATION	23
			NE	SW		IRRIGATION	23
			NW	SW		IRRIGATION	38

			SW	SW	IRRIGATION	38
			SE	SW	IRRIGATION	24
					Section Acres	240
06N	41E	11	NE	NW	IRRIGATION	23
			NW	NW	IRRIGATION	39
					Section Acres	62
					Total Acres	302

11. Place of use in counties: MADISON

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

22-2180

14. Remarks:

This claim is for an enlargement of 22-2180 for 15 acres within the place of use described above.

15. Basis of Claim: Beneficial Use

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: _____

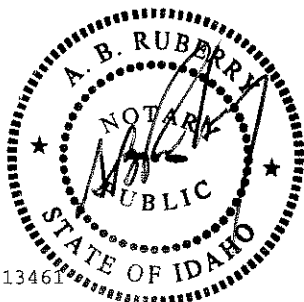
For Individuals:

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

Signature of Claimant(s): *Yae Schubertman* Date: Jan 12-06
 _____ Date: _____

State of Idaho)
 County of Bennett) SS.

Subscribed and sworn (or affirmed) before me this 12 day of January 2006



A. B. Ruberry

Notary Public

Residing at *PO Box 1000*

My commission Expires 9/23/09

Idaho Department of Water Resources Receipt

Receipt ID E031556

Payment Amount \$95.00 Date Received 1/12/2006 12:24:19 PM Region Eastern Status ☐
Payment Type Check Check Number 1572

Payer SCHWENDIMAN, VAL E

Comment SRBA CLAIM 22-13461
2 LARGE PHOTO MAPS (@\$15.00 EA)

Fee Detail

Amount	Description	Fund	FD	PCA	SO
\$65.00	ADJUDICATION FILING FEE	0337	43503	1155	
\$30.00	COPIES	0229	21	63100	1760

Signature Line (Dept. Representative)