

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 **21-12993**
Date Received:
Receipt No: **E031343**
Received By:

Amended

Amended

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

Norman D. Douglas Phone # (208) 403-9033
P.O. Box 14
Chester, ID 83421

RECEIVED

OCT 11 2005

Department of Water Resources
Eastern Region

2. Date of Priority: 07/25/1919

3. Source: SPRING , SPRING Trib. to: SINKS , SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
08N	42E	17	SW SW	FREMONT	
08N	42E	18	SE SE	FREMONT	

5. Description of diverting works:

DITCH FROM THE SPRING TO CANAL SYSTEM.

Source is locally known as East Anderson Springs.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	11/01	0.18	
STOCKWATER	04/01	11/01	0.02	
GROUND WATER RECHARGE			11/02 03/31 1.5	

7. Total Quantity Appropriated is:

0.18 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
08N	41E	13	NE $\frac{1}{4}$	NW $\frac{1}{4}$	1 Irrigation	9
					Section Acres	9
08N	42E	18	NW	NW	GROUND WATER RECHARGE	
					Total Acres	9

11. Place of use in counties: FREMONT

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

13. Other Water Rights Used:

14. Remarks: As spring flows recede a proportionate share will be allotted to each water user

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 X do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: ONE

For Individuals:

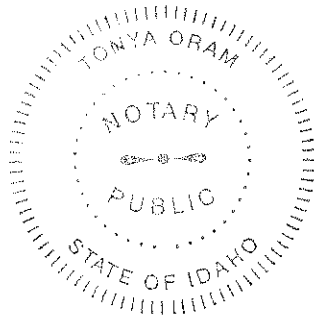
I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s): *James V. [Signature]* Date: 10-4-05
_____ Date: _____

State of Idaho

County of Tremont

Subscribed and sworn (or affirmed) before me this 4 day of October ~~September~~ 2005

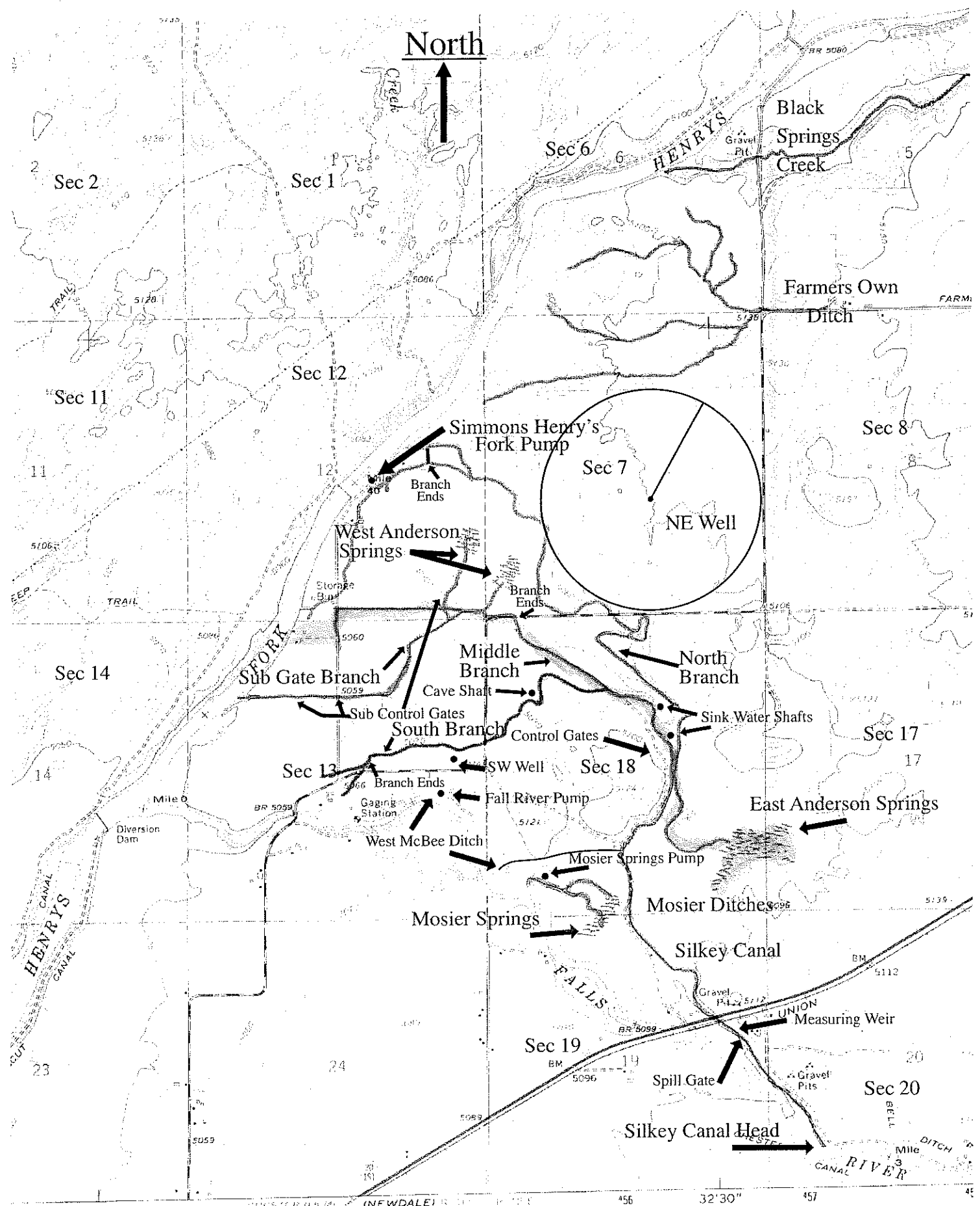


[Signature]
Notary Public

Residing at Risky

My commission Expires 10-14-09

North



SCALE 1:24,000