

\$50.00 LATE FEE
 \$50.00 CLAIM FEE
 \$100.00 ACCESSION FEE
 \$101.00 DUE

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 A75-11614 / 90
 Date Received _____
 Receipt Number E017718
 8-7-92

NOTICE OF CLAIM
 TO A
 WATER RIGHT
 ACQUIRED UNDER STATE LAW

RECEIVED
 AUG 14 1992
 Department of Water Resources
 Eastern District Office

Please type or print clearly

1. Name of Claimant (s) STANLEY OR ELISABETH MORGAN Phone (208) 756-3786
 Mailing Address 803 14th STREET, SALMON, ID Zip 83467

2. Date of Priority (Only one (1) per claim) APRIL 1, 1961

3. Source of water supply (a) JESSIE CREEK
 which is tributary to (b) SALMON RIVER

4. a. Location of existing point of diversion is: Township 21N Range 21E Section 1
1/4 of NE 1/4 of NE 1/4, Govt. Lot, _____ B.M., County of LEWIS

A751614



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 _____

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.

WATER IS DIVERTED INTO A
PRIVATE DITCH, 6" DEEP 12" WIDE 1/2 ABOUT 1/8 MILE LONG

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For IRRIGATION purposes from 4/15 to 10/15 amount 0.03 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.03 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 2.5 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) NONE

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	
<u>22N</u>	<u>21E</u>	<u>36</u>																<u>1</u>	<u>1</u>

Total number of acres irrigated 1

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

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

14. Remarks:

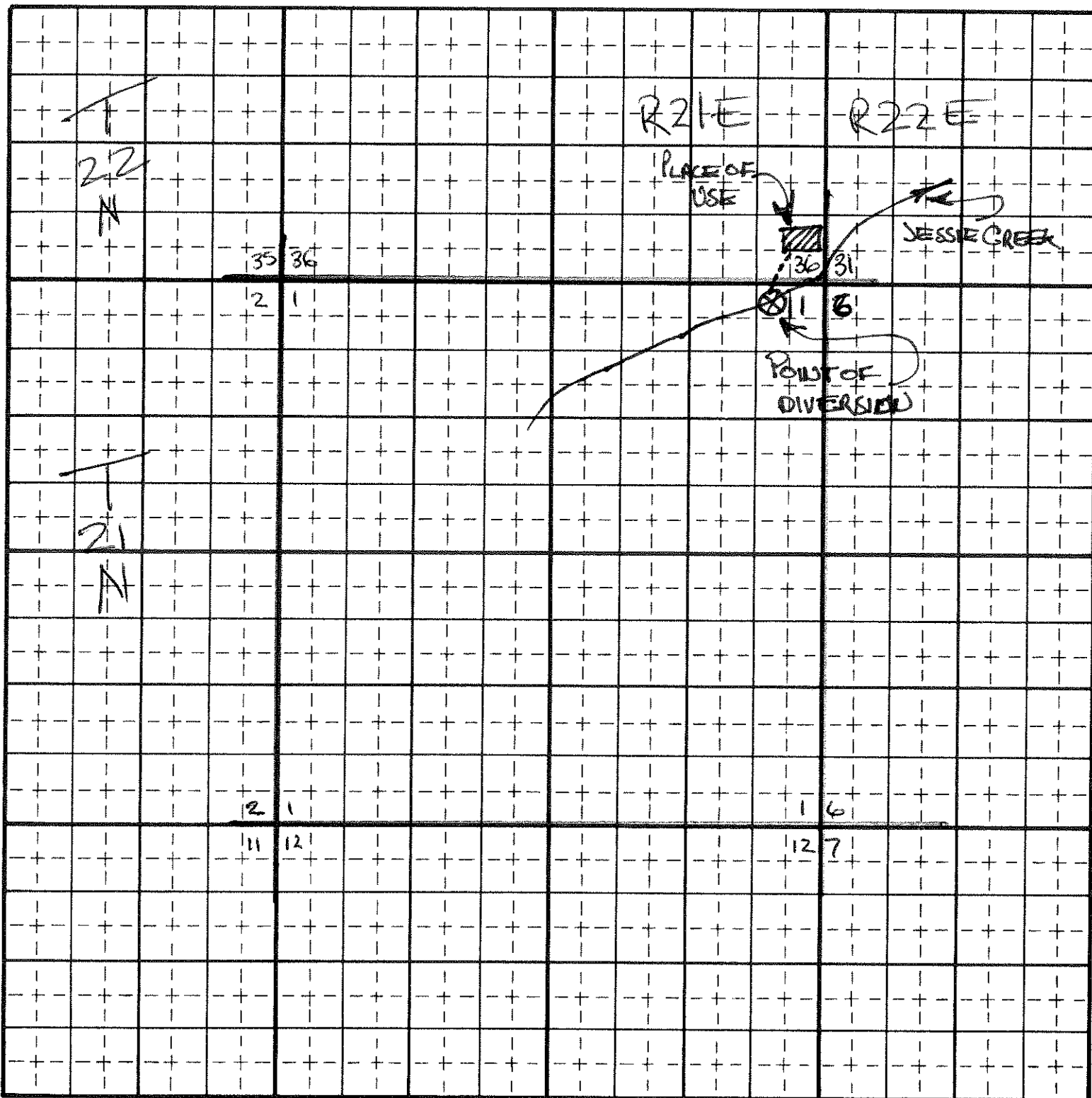
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Last Name MORGAN Ident No. _____

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Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



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Last Name

Morgan

Ident No.

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____
Decree _____
If applicable provide IDWR Water Right Number _____
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.

X Signature of Claimant (s) Stanley Morgan Date _____
Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

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

X Subscribed and sworn (or affirmed) before me this 12 day of Aug 19 92

SEAL

Notary Public Carl V. Meyer

Residing at Salmon

My Commission Expires 4-25-1997

Please Print Name

17. Notice of Appearance:
Notice is hereby given that I, _____ 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 _____

Date _____

Last Name _____ Ident. Number _____

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