

10/18/2004

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 34-13811

NAME AND ADDRESS: ORVEATA P WARNER REVOCABLE FAMILY TRUST
C/O VONDA P BRUHN AND A JEAN HODGE TRUSTEES
673 PACKARD AVE
POCATELLO ID 83201

SOURCE: SPRING

TRIBUTARY: BIG LOST RIVER

QUANTITY: 0.030 CFS

PRIORITY DATE: 09/30/1957

POINT OF DIVERSION:

T07N R24E S18 NESESE Within CUSTER County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

IRRIGATION

05/01 10/31

0.030 CFS

PLACE OF USE: IRRIGATION Within CUSTER County

T07N R24E S18 SESE 1.0

1 ACRES TOTAL

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL:

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 34-13811
Date Received: 7/16/2003
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

ORVEATA P WARNER REVOCABLE FAMILY TRUST Phone:

673 PACKARD AVE
POCATELLO ID USA 83201

2. Date of Priority: 09/30/1957

3. Source: SPRING Trib. to: BIG LOST RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
07N	24E	18	NE SE	CUSTER	

5. Description of diverting works:

ONE-HP CENTRIFUGAL PUMP WITH OUTPUT OF 46 GPM INSTALLED IN 1970

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	05/01	10/31	0.08	

7. Total Quantity Appropriated is:
0.08 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
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07N	24E	18	NE	SE	IRRIGATION	1
					Section Acres	1
					Total Acres	1

11. Place of use in counties: CUSTER

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

13. Other Water Rights Used:

14. Remarks:

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.

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 34-13811Date Received 3-1-04Receipt Number CO72809 & CO72870

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW

Please type or print clearly Bruhn
Vonda P. (Warner) & Arva Jean Hodge - Co-Successor
1. Name of Claimant (s) Trustees of Orveta P. Warner Revocable Family Trust Phone (208) 232-8834

Mailing Address 673 Packard Ave Pocatello, Id 83201 Zip _____

2. Date of Priority (Only one (1) per claim) September 1957

3. Source of water supply (a) Natural flowing Spring from mountain
which is tributary to (b) Big Lost River

4. a. Location of existing point of diversion is: Township 7N Range 24E Section 18,

_____ 1/4 of NE 1/4 of SE 1/4, Govt. Lot, _____ B.M., County of Custer

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township 7N Range 24E Section 18, _____ 1/4 of NE 1/4 of SE 1/4,

Govt. Lot _____ B.M., County of Custer

ending point is: Township 7N Range 24E Section 18, _____ 1/4 of NE 1/4 of

SE 1/4, Govt. Lot _____ B.M., County of Custer

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. 1 HP Centrifugal Pump

with output of 46 GPM installed in 1970

SCANNED

MAR 02 2004

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For yard irrigation purposes from May 1 to Oct 31 amount 0.08 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.08 (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.) N/A

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	
7N	24E	18													/				/

Total number of acres irrigated 1

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

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:

Last Name Warner Family Trust Ident No. 34-13811

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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

T 7N R 24E S 18

A 20x20 grid of squares, each containing a crosshair. The grid is divided into four quadrants by a vertical line at column 10 and a horizontal line at row 10. The quadrants are labeled: Top-Left (NW) as 'N W 1/4', Top-Right (NE) as 'N E 1/4', Bottom-Left (SW) as 'S W 1/4', and Bottom-Right (SE) as 'S E 1/4'. A small arrow points to the right from the right edge of the grid.

Last Name Warner Family Trust

Ident No.

34-13811

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KAP 02-03

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.

Signature of Claimant (s) Linda P. Bruhn Date July 9, 2003
Arva Jean Hodge Date July 9, 2003

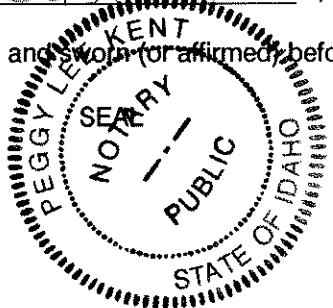
For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho or _____)
County of CUSTER) SS.

Subscribed and sworn to (or affirmed) before me this Ninth day of July, 2003 19__



Notary Public Peggy Lee Kent

Residing at MACKAY, ID 83251

My Commission Expires 3-29-05

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 Warner Family Trust Ident. Number 34-13811

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34-13811

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