

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 75-14063
Date Received: 4/3/2002
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

JOHN GOODMAN Phone: (208)756-4385

100 POLLARD CREEK RD
SALMON ID USA 83467

SHERRI GOODMAN Phone: (208)756-4385

100 POLLARD CREEK RD
SALMON ID USA 83467

2. Date of Priority: 04/01/1913

3. Source: POLLARD CANYON CREEK Trib. to: SALMON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
21N	21E	2	NE SE	LEMHI	

5. Description of diverting works:

BURIED PERFORATED PIPE IN CREEK, PUMP AND SPRINKLERS AT PLACE OF USE.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	11/01	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
21N	21E	2	SE	SE	IRRIGATION	4
					Section Acres	4
					Total Acres	4

11. Place of use in counties: LEMHI

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

13. Other Water Rights Used:

14. Remarks:

OTHER WATER RIGHT 75-15

15. Basis of Claim: Decreed

RECEIVED
MAR 21 2002
Department of Water Resources
Eastern Region

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Receipt Number

75-14063
4-3-02
E027601

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED
APR 03 2002
Department of Water Resources
Eastern Region

Please type or print clearly

1. Name of Claimant (s) John & Sherri Goodman Phone (208) 756-4385Mailing Address 100 Pollard Creek Rd. Salmon ID Zip 834672. Date of Priority (Only one (1) per claim) 04/01/19133. Source of water supply (a) Pollard Creek
which is tributary to (b) Salmon River4. a. Location of existing point of diversion is: Township 21N Range 21E Section 02,
1/4 of NE 1/4 of SE 1/4, Govt. Lot, _____ B.M., County of Lemhi

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.+ buried perforated pipe in creek, pump
+ sprinklers at place of use

A7514063



6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For irrigation purposes from 04/01 to 11/01 amount .08 cfs or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .08 cfs (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is .08 cfs 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:

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
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
21N	21E	2																4.0	4.0

Total number of acres irrigated 4.0 ac.

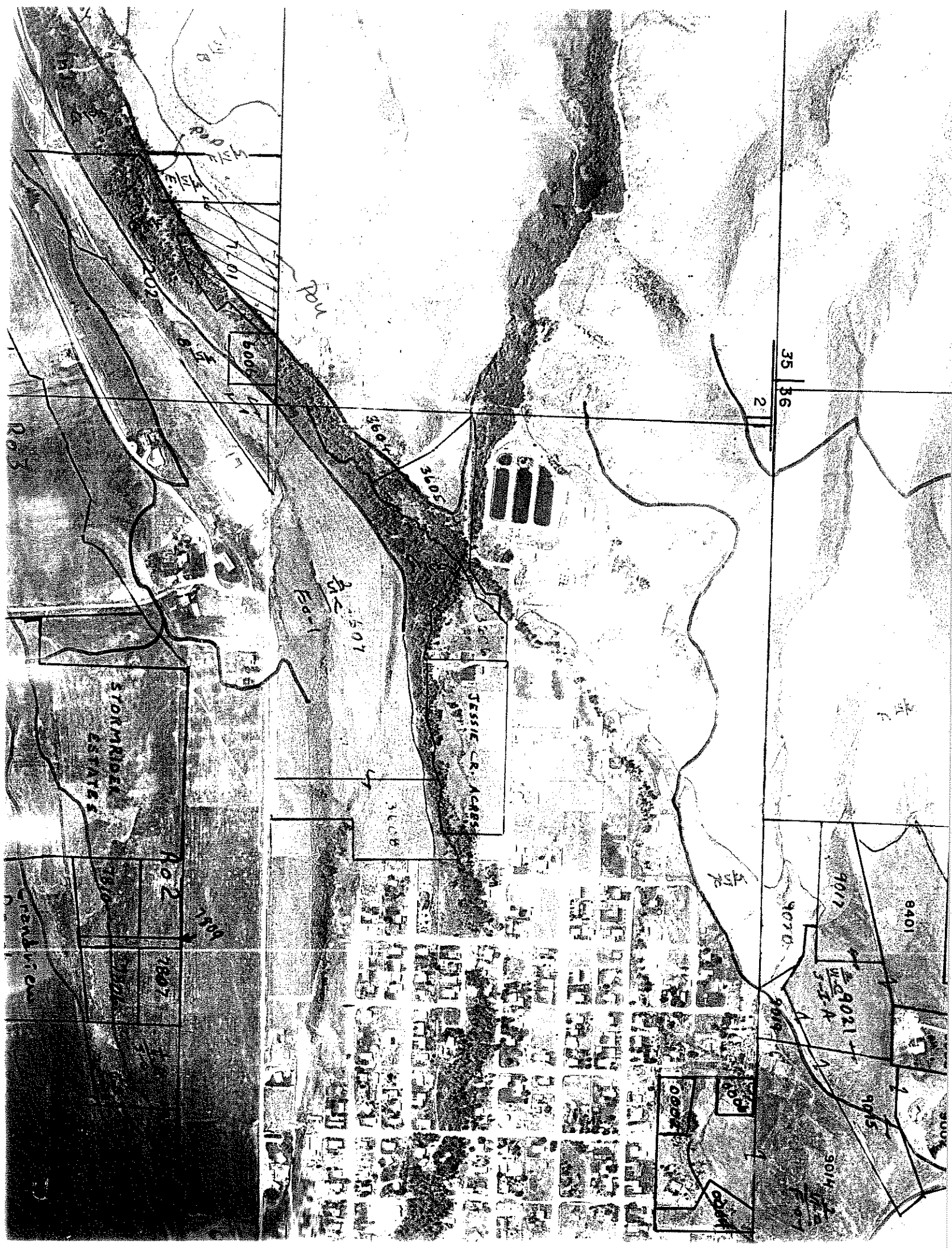
11. In which county (ies) are lands listed above as place of use located? Lemhi

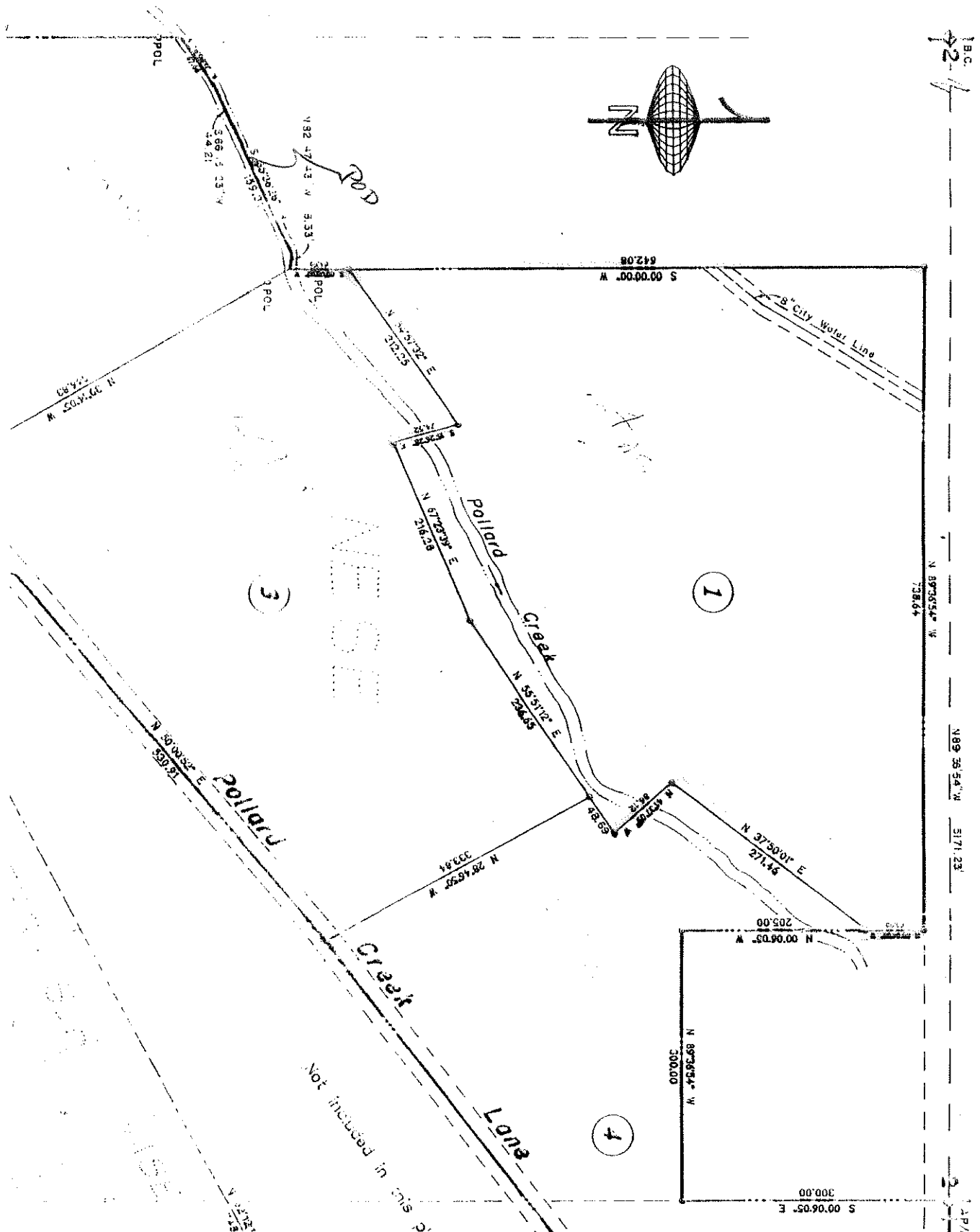
12. Do you own the property listed above as place of use? Yes ✓ No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above. _____ or None (x)

14. Remarks: actual source is Pollaro Creek not Jesso Creek

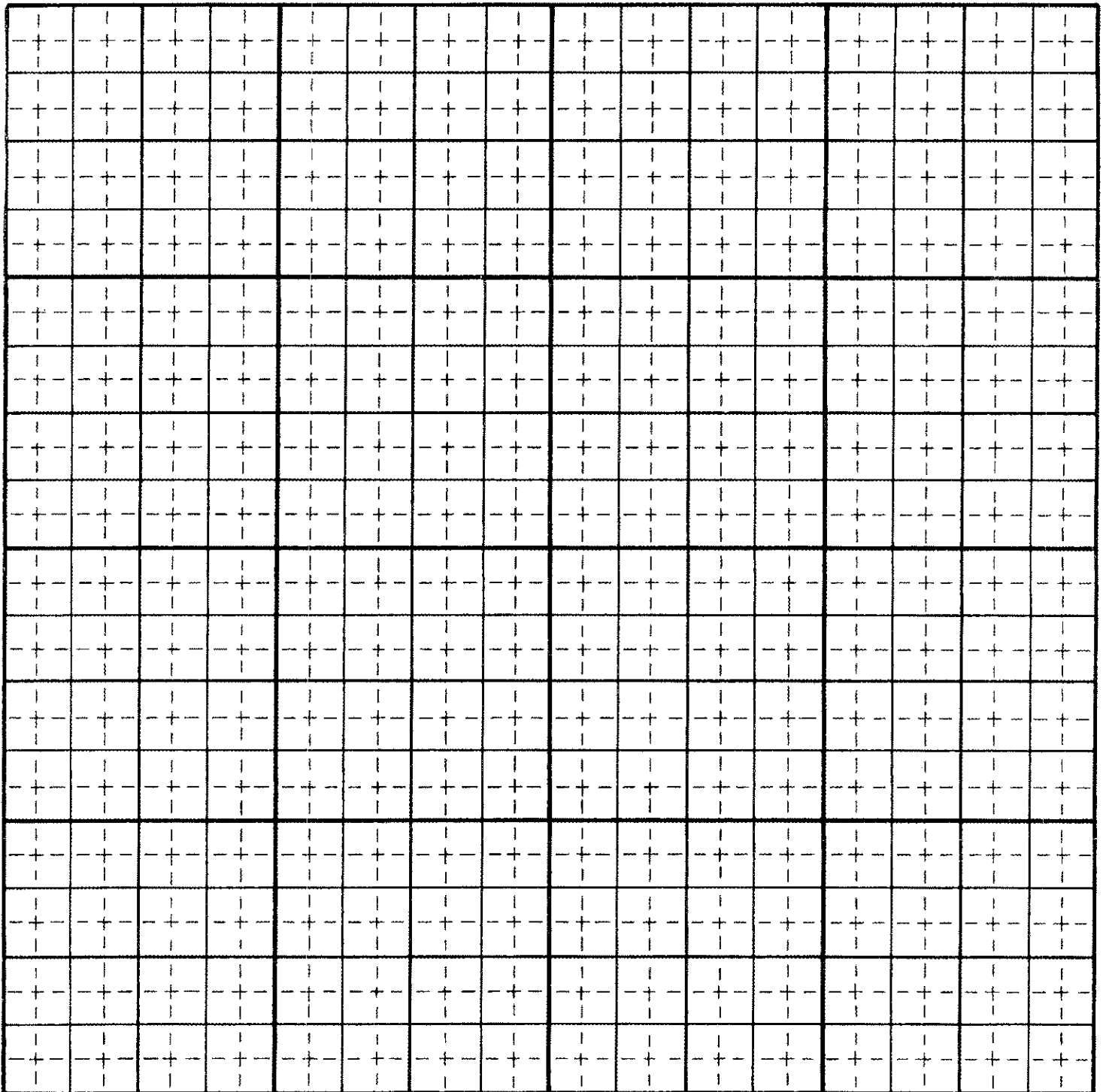
Last Name _____ Ident No. _____





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

Scale: 2 inches equals 1 mile



Last Name _____ Ident No. _____

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License _____ Permit _____
Decree X
If applicable provide IDWR Water Right Number 75-15
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) _____

Date

3/20/02

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 _____

Title

of _____

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 _____)

SS.

County of Lemhi)

Subscribed and sworn (or affirmed) before me this

20th

day of

March

18 2002

Notary Public

Robert E. Post

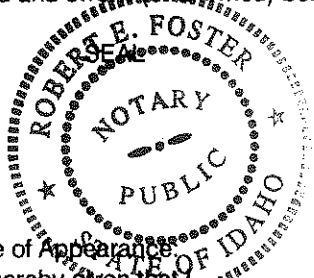
Residing at

Salmon Idaho

My Commission Expires

02/16/07

Please Print Name



17. Notice of Appearance

Notice is hereby given that _____ 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 _____