



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 287-4800 FAX: (208) 287-6700 www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Director

May 16, 2008

JAMES E BONATO
PO BOX 350
LUCILLE ID 83542

RE: Amended Notice of Claim to a Water Right in the Snake River Basin Adjudication (SRBA)

Dear Mr. Bonato:

Enclosed is a draft amended claim form that you may use if you wish to amend your SRBA claim no. 79-13962. The draft amended claim contains additional water uses that were not included on your original claim, but could possibly be recommended to the SRBA Court if you can obtain an affidavit from Mr. Melvin Gill. The affidavit would need to document the key points of the historic water use on your property that were discussed when we visited your property on May 14, 2008.

I have also enclosed the SRBA Court's Standard Form 4 that must be completed and sent to the Court along with the signed amended claim. You must also provide copies of the Standard Form 4 and the amended claim to all of the parties to subcase 79-13962 as instructed on page 6 of the Standard Form 4.

While I have provided a draft document for amending the claim, you may make changes to the document before filing the claim with the Court. However, if you do make any changes, please initial those changes on the original amended claim form that you send to the Court, and please be sure that all of the copies of the amended claim show those changes.

Please keep in mind that the amounts shown on the amended claim may or may not be what will be recommended to the Court. What I have entered on the draft amended claim are amounts that appear to meet or exceed the water uses that I observed when we visited your property on May 14. If the Court grants your motion to amend the claim, Idaho Department of Water Resources will file an amended Director's Report that will be dependent on the documentation that you provide that shows the use of water on your property prior to the date of the mandatory permit requirement for surface water, which was May 20, 1971.

If you have any questions, you may contact me at (208) 287-4917 or by email at carter.fritschle@idwr.idaho.gov.

Sincerely,

A handwritten signature in black ink that reads "Carter Fritschle".

Carter Fritschle
Section Manager
Adjudication Bureau

Enclosures:

Draft Amended Notice of Claim 79-13962
SRBA Court's Standard Form 4

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 79-13962
Date Received: 5/21/1999
Receipt No: W025229
Received By:

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

1. Name of Claimant(s)

JAMES E BONATO Phone: (208) 628-3087
PO BOX 350
LUCILE ID 83542

2. Date of Priority: 12/31/1902

3. Source: CABIN CREEK Trib. to: COW CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
25N	01E	8	NE NE	IDAHO	

5. Description of diverting works:

12" HEADGATE WITH 400' OF DITCH; DRAINAGE BACK TO CABIN CREEK.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	03/15	11/15	0.15	
STOCKWATER	01/01	12/31	0.02	
DOMESTIC	01/01	12/31	0.04	
FIRE PROTECTION	03/15	11/15	0.50	

7. Total Quantity Appropriated is:
0.50 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
25N	01E	5	SE	SE	DOMESTIC	
			SE	SE	STOCKWATER	
			SE	SE	IRRIGATION	5
			SE	SE	FIRE PROTECTION	
Section Acres						5
Total Acres						5

11. Place of use in counties: IDAHO

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.

Number of attachments: _____

For Individuals:

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

Signature of Claimant(s): _____ Date: _____
 _____ Date: _____