

SCANNED

AUG 05 2001

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: A24-02017
Date Received: 2/14/1990
Receipt No: E012197
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT L. HILD 805-682-8111
Address: 4475 VIA ABRIGADA
SANTA BARBARA, CA 93110

2. Date of Priority: APR 05, 1911

3. Source: SPRING CREEK Trib. to: WEBSTER CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	46E	32	NE	NE			CARIBOU

5. Description of diverting works:
HEADGATE AND DITCHES

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	2.800		

7. Total Quantity Appropriated is:
2.800 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 350.0 Acre Feet Per Annum.

9. Non-irrigation uses:
S/ 250 HEAD CATTLE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	46E	33	SW	NW		IRR	37.0
			SE	NW		IRR	33.0
			NE	SW		IRR	36.0

A24-02017

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Date: 03/26/90

A2402017



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10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
07S	46E	33	NW SW		IRR	34.0

Section Acres 140.0

Total Acres 140.0

11. Place of use in counties: CARIBOU

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

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: LICENSE
Water Right Number: 7211

E.O.

Receipt Number 6012197

RECEIVED

MAR 1 - 1990

Department of Water Resources
Eastern District Office

- Headgate and ditch.

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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 2.8 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 2.8 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 490 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.)
Incidental stockwatering of 250 head of cattle and horses.

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 instruction for standard symbols.

TWP:RNG:SEC:	NE1/4	:	NW1/4	:	SW1/4	:	SE1/4	:TLS
:	:NE 'NW 'SW 'SE	:	:NE 'NW 'SW 'SE	:	:NE 'NW 'SW 'SE	:	:NE 'NW 'SW 'SE	:
7S:46E: 33:	' ' ' ' 37'	:	' ' ' ' 33'	:	' ' ' ' 36'	:	' ' ' ' 34'	:140
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:
:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:	' ' ' ' :	:

Total number of acres irrigated 140

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

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 Hild Ident. Number 24-2017

If applicable provide IDWR Water Right Number 24-201
 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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 1

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s) [Signature] Date 2/13/90
 Robert L. Hild _____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____ of _____, that I have signed the
 Title _____ Organization _____

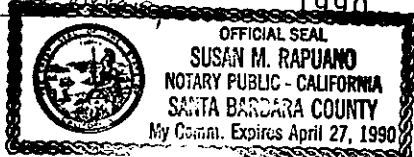
foregoing document in the space below as _____ Title _____
 of _____ and that the statements contained in the
 Organization _____

foregoing document are true and correct.

Signature of Authorized Agent _____
 Title and Organization _____ Date _____

State of Idaho/or CALIFORNIA)
 County of SANTA BARBARA) SS.

Subscribed and sworn (or affirmed) before me this 13th day
 of February 1990



Notary Public Susan M. Rapuano
 Residing at 529 Auherst Dr COLETA, CA
 My Commission Expires 4/27/90 93117

17. Notice of Appearance:

Notice is hereby given that I, Kent W. Foster 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 [Signature]
 Address P.O. Box 50130, Idaho Falls, Idaho 83405
 Date 2/14/90

Last Name Hild Ident. Number _____ MICROFILMED

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