

1 21960 Recon USFS
D/C All Min

2 23.63 1 36.33

MS 891

24115
D/C

1 21.00 2 35.50

MS 2695

3 37.70

101 26755
Recon USFS
No Min
12/5/1989
WD to USFS
Min Only

3 17.30

512548
D/C

4 10.32

6 35.50 7 28.60

28

MS 2068

2 25.60

2 35.60

2 11.40

3 33.50

4 29.60

5 27.50

6 8.90

956133
D/C

33

1 19290 50'

9 28.90 3 27.50

MS 3043 A

956082
D/C

24

23

26

27

34

1 08803
PL 167

1 19290 100'

25

1 19290 50'

1031321
D/C

3 37.20

MS 3106

2 9.50

5 26.00 6 36.30

1031322
D/C

MS 3104

7 36.50

8 30.80

1 21960 Recon USFS
D/C All Min

7 3.69

1 1.34

11-90-0011
D/C

8 1.54

4 37.55

1 19290 50'

1 19290 100'

1 19290 50'

35

9 32.42

1 19290 50'

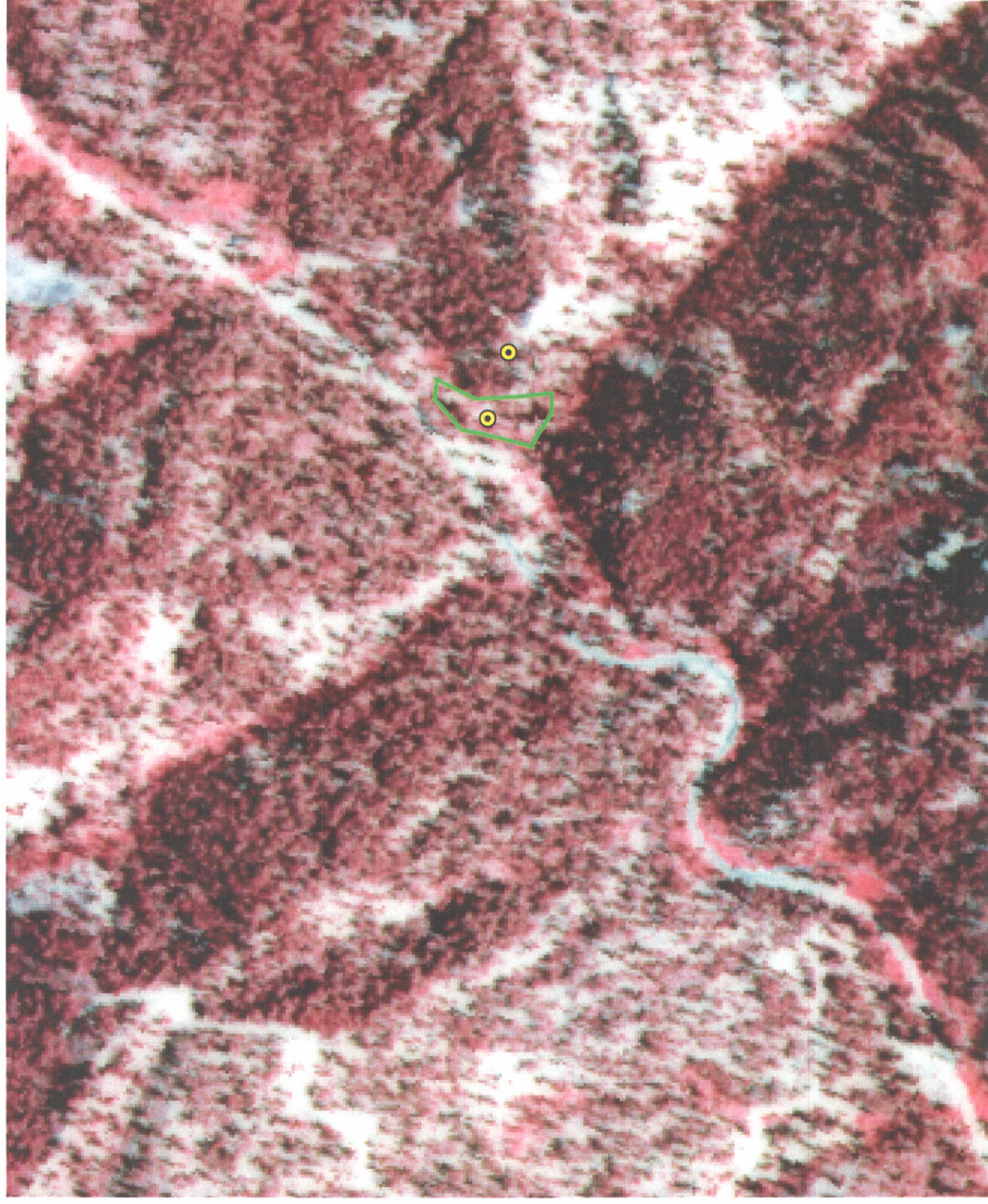
PLO 3865
WD to USFS
Rec Area

10 37.65

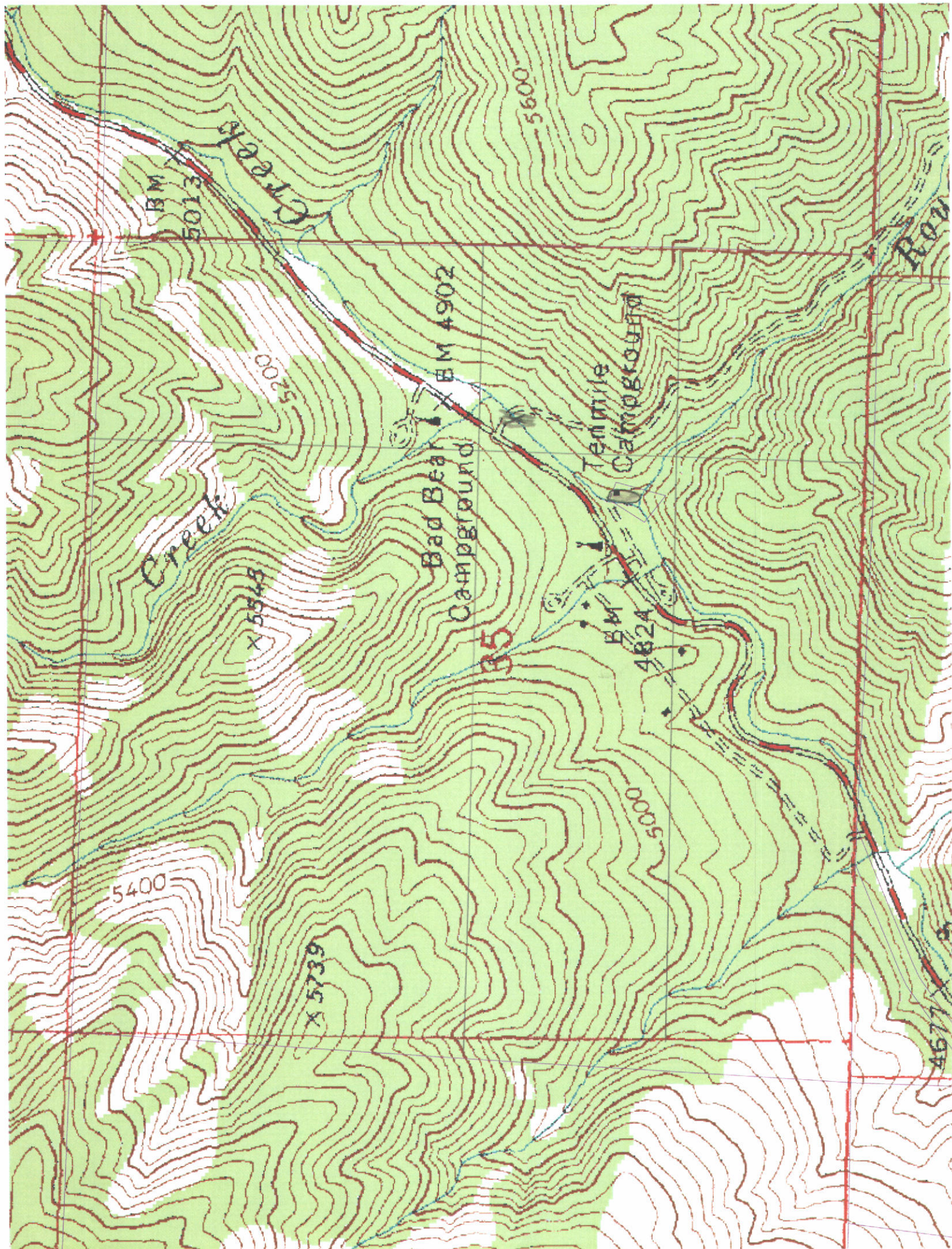
IDAHO DEPT OF WATER RESOURCES

Claim No(s) 63-16373
63-16375
T07N, R06E, Sec 35
Prepared by: Maria Minicucci
February 12, 2002

-  Place of use
-  Point of diversion
-  Section Lines
-  Quarter quarter lines



400 0 400 800 Feet



Creek

BM

5013

Creek

X 5543

Bad Bear

Campground

35

Temple

Campground

BM

4824

5400

X 5739

5600

5000

Road

4677



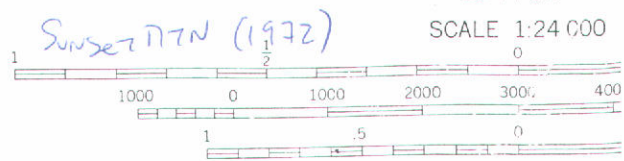
edited, and published by the Geological Survey
JSGS and NOS/NOAA

by photogrammetric methods from aerial
s taken 1971. Field checked 1972

and 10,000-foot grid ticks: Idaho coordinate
st line (transverse Mercator)



T 7N
R 6E
S 35



CONTOUR INTERVAL 40

SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer P. Pinicucci
D. BUFFINGTON

Legal Description 77N R6E S35 NESE

① Point of
Diversion

Looking North
upstream along
Flones Creek



② Point of
Diversion

Opening in
headwall is
2.6' x 1.9', to
open ditch.



SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer T. DiNivucci
D. BUFFINGTON

Legal Description 77NR6E53S NWSE

③ End of ditch
@ POU.

Ditch runs
along base of
concrete & rock
wall.

Located on
north end of
property (POU).



④ Other side
of concrete &
Rock wall. Ditch
OUTLET plus
numerous small
outlets for flood
irrigation.



SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer N. Pinicucci
D. BUFFINGTON

Legal Description 77N R 6E S 35 NWSE

⑤ Place of Use
From North end
of property, looking
South.
Garage on left,
cabin in the
background (left)



⑥ Place of Use
From North end
of property.
Garage on left,
cabin in
middle of photo



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: **A63-16375**
Date Received: 6/22/1989
Receipt No: C007756
Received By: _____

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

1. Name: CARL E NICHOLSON 208-888-1593
Address: PO BOX 690
MERIDIAN ID 83680
OR
Name: BLANCHE NICHOLSON 208-888-1593
Address: PO BOX 690
MERIDIAN ID 83680
OR
Name: CARL V NICHOLSON 208-888-1593
Address: PO BOX 690
MERIDIAN ID 83680
OR
Name: THOMAS T NICHOLSON 208-888-1593
Address: PO BOX 690
MERIDIAN ID 83680

2. Date of Priority: MAY 1, 1932

3. Source: SPRING Trib. to: ROUGH CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
07N	06E	35	SE	NW	SE		BOISE

5. Description of diverting works:
ROCK AND DIRT DAM AND DITCH

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	05/01	10/30	0.300		

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

A.F.A. **MICROFILMED**
JUL 26 1994

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

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
07N	06E	35	NW SE		IRR	

11. Place of use in counties: BOISE

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

13. Other Water Rights Used:
NONE

14. Remarks:

TITLE IS BEING ACQUIRED FROM THE U.S. FOREST SERVICE BY EXCHANGE
AGREEMENT
ADDRESS CHANGED BY LH 3/18/94.

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 that the statements contained in the foregoing document are true and correct.

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

MICROFILMED

JUL 26 1994

State of Idaho)
) SS.
County of _____)

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

MICROFILMED

JUL 26 1994

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: A63-16375
Date Received: 7/17/1989
Receipt No: C007756
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CARL E. NICHOLSON 208-375-5255
Address: 10322 ESTATE DRIVE
BOISE, ID 83709
OR
Name: BLANCHE NICHOLSON 208-375-5255
Address: 10322 ESTATE DRIVE
BOISE, ID 83709
OR
Name: CARL V. NICHOLSON 208-375-5255
Address: 10322 ESTATE DRIVE
BOISE, ID 83709
OR
Name: THOMAS T. NICHOLSON 208-375-5255
Address: 10322 ESTATE DRIVE
BOISE, ID 83709

2. Date of Priority: MAY 01, 1932

3. Source: SPRING Trib. to: ROUGH CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07N	06E	35	SE	NW	SE		BOISE

5. Description of diverting works:
ROCK AND DIRT DAM AND DITCH

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	05/01	10/30	0.300		

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

A63-16375

Page 1

Date: 07/17/89

MICROFILMED
AUG 25 1992

Acre Feet Per Annum.

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
07N	06E	35	NW SE		IRR	

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

14. Remarks:
TITLE IS BEING ACQUIRED FROM THE U.S. FOREST SERVICE BY EXCHANGE
AGREEMENT

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 that the statements contained in the foregoing document are true and correct.

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

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

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: 39576Ident. Number 763-16375

Date Received _____

Receipt Number C007756

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED
JUN 21 1989

Department of Water Resources

Please type or print clearly

1. Name of Claimant (s) See attached sheet Phone (208) 375-5255Mailing Address 10322 Estate Drive, Boise, Idaho Zip 837092. Date of Priority (Only one (1) per claim) May 1, 19323. Source of water supply (a) Mores Creek
which is tributary to (b) Boise River4. a. Location of existing point of diversion is: Township 7 N Range 6 E Section 35,
NW 1/4 of SE 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of Boise

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. Rock and dirt dam and ditch.

MICROFILMED

AUG 25 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For irrigation purposes from May 1 to Oct. 30 amount 0.30 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.30 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 3 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
			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	6E	35														1.5			1.5

Total number of acres irrigated 1.5

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

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.
0.10 c.f.s. Rough Creek or None ()

14. Remarks: This water right is for lawn and garden irrigation using
relatively high rate of flow for one or two days per week.
Title is being acquired from U.S. Forest Service by
exchange agreement.

Last Name Nicholson Ident No. _____

MICROFILMED
Copies: White - State, Yellow - Claimant
AUG 25 1992

15. Basis of Claim (check one) Beneficial Use X 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 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) Thomas T. Nicholson Date 6-20-89

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 Ada) SS.

Subscribed and sworn (or affirmed) before me this 20th day of June 19 89

SEAL

Notary Public Anita C. Mc Cormick

Residing at Boise Idaho

My Commission Expires 11-14-92

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, W. F. Ringert 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 P. O. Box 2773, Boise, ID 83701

Date _____

Last Name Nicholson Ident. Number _____

MICROFILMED

Copies White-Suppl Yellow-Clayton
AUG 25 1992

ATTACHMENT TO NOTICE OF CLAIM TO A WATER RIGHT

1. Carl E. Nicholson or Blanche Nicholson (50%), Carl V. Nicholson (25%), and/or Thomas T. Nicholson (25%).

MICROFILMED

AUG 25 1992

10

DISTRICT COURT - SRBA
TWIN FALLS CO., IDAHO
FILED 12

PAGE 1
Oct-14-2003

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS**

In Re SRBA	)	Subcase No. <u>63-16375</u>
	)	
Case No. 39576	)	Standard Form 5
	)	
	)	STIPULATED ELEMENTS
	)	OF A WATER RIGHT
	)	

This form is used to report the stipulated elements of one water right acquired under state law and/or one federal reserved water right. Submission of this form will not automatically result in the issuance of a partial decree. The Presiding Judge or Special Master will conduct any hearing necessary to determine the facts, date, expert opinions and law supporting the issuance of a partial decree for the water right.

The parties agree that the Snake River Adjudication Court has jurisdiction of the parties and subject matter to enter a partial decree for this water right; that they have been served with sufficient process, according to the law; and that they have appeared, prosecuted, and defended their positions with regard to this water right dispute.

The parties and IDWR agree and stipulate that the elements of this water right should be described per the attached claim. The parties and IDWR have further indicated their concurrence by initialing each of the attached pages.

CLAIMANTS:

Thomas T. Nicholson
Thomas T. Nicholson Date

Diana R. Nicholson
Diana R. Nicholson Date

OBJECTOR:

United States on behalf of the
USDA Forest Service

David L. Negri Date

IDWR CONCURRENCE:

Jan Shurte 7-18-03
Jan Shurte Date

ATTORNEY FOR IDWR:

Nicholas B. Spencer Date

IDAHO DEPARTMENT OF WATER RESOURCES RECOMMENDED
WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 63-16375

NAME AND ADDRESS:

DIANA R NICHOLSON
PO BOX 690
MERIDIAN ID 83680-0690

THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83680-0690

479.
DOK
JP

SOURCE: MORES CREEK Tributary: BOISE RIVER

QUANTITY: 0.020 CFS

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL
COMBINED DIVERSION RATE OF .02 CFS PER ACRE AT FIELD HEADGATE.

PRIORITY DATE: 05/01/1932

POINT OF DIVERSION:

~~T07N R06E S35 NWNESE~~
~~Within BOISE County~~

T07N R06E S35 NWNESE Lot 7
Within BOISE County

PURPOSE AND PERIOD OF USE:	Purpose of use	Period of use:	Quantity:
	IRRIGATION	04/15 10/31	0.020 CFS

PLACE OF USE: IRRIGATION within BOISE County
~~T07N R06E S35 NWSE 1.0~~
T07N R06E S35 NWSE Lot 1 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: BASIS OF CLAIM - Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E358300A, LAND PATENT NO. 11-90-0011.

07/03/2003

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

RIGHT NUMBER: 63-16375

NAME AND ADDRESS: THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83680-0690

DIANA R NICHOLSON
PO BOX 690
MERIDIAN ID 83680-0690

SOURCE: MORES CREEK TRIBUTARY: BOISE RIVER

QUANTITY: 0.020 CFS

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL
COMBINED DIVERSION RATE OF .02 CFS PER ACRE AT FIELD HEADGATE.

PRIORITY DATE: 05/01/1932

POINT OF DIVERSION:

T07N R06E S35 NWNESE Lot 7 Within BOISE County

PURPOSE AND PERIOD OF USE:	<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
	IRRIGATION	04/15 10/31	0.020 CFS

PLACE OF USE: IRRIGATION Within BOISE County
T07N R06E S35 Lot 1 NWSE 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: Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E35S8300A, LAND PATENT NO. 11-90-0011.

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re SRBA

Water Rights: 63-16373 & 63-16375

Case No. 39576

NOTICE OF COMPLETED
ADMINISTRATIVE
PROCEEDING

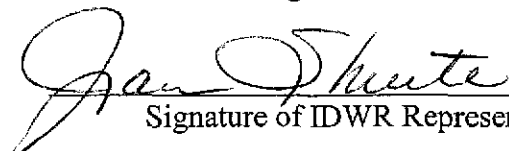
IDWR has completed the following administrative proceeding:

- ☐ Address change
- ☒ Substitution of Party
- ☐ IC § 42-222 transfer
- ☐ Point of diversion ☐ Place of use
- ☐ Period of use ☐ Nature of use
- ☐ Split of water right ☐ Change in ownership
- ☐ Other
- ☐ IC § 42-219 license

IDWR certifies that it has completed its investigation into the changes to the elements of the water rights listed above as set forth in the attached *Amended Director's Report(s)* for said water right(s). No other changes have been made to the elements of these water rights except as set forth above.

IDWR has served copies of the *Notice of Completed Administrative Proceeding* and *Amended Director's Report(s)* on the claimant(s), prior claimant(s) and all parties in the subcases affected, if any, as reflected on the attached certificate of mailing.

DATED: July 3, 2003


Signature of IDWR Representative

CERTIFICATE OF MAILING

I certify that on July 3, 2003, I delivered the original and copies of this form, including all attachments, to the following persons, postage prepaid if required and addressed as follows:

1. Original to:

Clerk of the District Court
Snake River Basin Adjudication
P.O. Box 2707
Twin Falls, ID 83303-2707

☐ overnight mail
☒ regular mail
☐ hand-delivered
☐ facsimile

2. Copies to:

Clive Strong
Office of the Attorney General
Statehouse Mail
Boise, ID 83720-0010

☐ overnight mail
☒ regular mail
☐ hand-delivered
☐ facsimile

United States Dept of Justice
Environment & Natural Resource Div
550 West Fort Street MSC 033
Boise ID 83724

☐ overnight mail
☒ regular mail
☐ hand-delivered
☐ facsimile

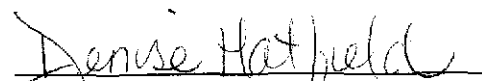
3. Copies to all parties to the subcase:

Thomas T Nicholson *(Former Owners)*
Blanche Nicholson
Carl E Nicholson
Carl V Nicholson
PO Box 690
Meridian ID 83680

☐ overnight mail
☒ regular mail
☐ hand-delivered
☐ facsimile

Thomas T Nicholson *(Current Owners)*
Diana R Nicholson
PO Box 690
Meridian ID 83680-0690

☐ overnight mail
☒ regular mail
☐ hand-delivered
☐ facsimile


Signature of person mailing this document



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way, Boise, Idaho 83705-5082 - (208) 334-2190

FAX (208) 334-2348

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

July 3, 2003

THOMAS T NICHOLSON
DIANA R NICHOLSON
PO BOX 690
MERIDIAN ID 83680-0690

RE: Water Right No. 63-16373 & 63-16375

Dear Property Owner(s):

Enclosed is a copy of the above referenced water right(s), which reflects the change in ownership of the land and appurtenant water rights, covered under the original filing. Also enclosed is a copy of the Notice of Completed Administrative Proceedings, which has been sent to the Snake River Basin Court as notification of the change.

Thank you for your patience and cooperation, as we have had several water right changes to process. If you have any questions concerning the enclosed water rights, please feel free to contact this office.

Sincerely,

A handwritten signature in cursive script that reads "Denise Hatfield".

Denise Hatfield
Office Specialist 1
Adjudication Section
Western Region

DH: dh

Enclosures

cc: Blanche Nicholson, Carl E Nicholson, Carl V Nicholson

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
 Incomplete forms will be returned.

RECEIVED
JUL 02 2003
 WATER RESOURCES
 WESTERN REGION

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
63-16373					
63-16375					

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts.
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).
OR
 If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s) Blanche Nicholson, Carl E. Nicholson
Carl V. Nicholson, Thomas T. Nicholson
4. New Owner/Claimant(s) Thomas T. Nicholson, Diana R. Nicholson
 Name Connector (Check one): ☐ and, ☐ or, ☒ and/or
- New Mailing Address P.O. Box 690
- City, State and ZIP Code Meridian ID 83680-0690
- New Telephone Number (208) 888-1593
5. Date you acquired the property 7/18/00

RECEIVED
JUL 02 2003
 WATER RESOURCES
 WESTERN REGION

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

7. Signature of New Owner(s) or Claimant(s) Thomas J. Nicholson
 (include title if applicable) Debra K. Nicholson

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only
 Received by [Signature] Date 7-2-03 Fee N/A
 Receipted by _____ Date _____ Receipt No. _____
 Processed by _____ AJ Date _____ WR _____ Date _____

INST# 177842
REQUEST Tom Nicholson

00 JUL 28 PM 2:45

177842
WARRANTY DEED

BOISE COUNTY RECORDER

BY Shirley Seage
FEE \$16.00/ch

CARL V. NICHOLSON and PATRICIA A. NICHOLSON, Grantors, hereby convey, grant and warrant our undivided 50% ownership of the following described property to THOMAS T. NICHOLSON and DIANA R. NICHOLSON, Grantees, whose current address is P.O. Box 690, Meridian, ID 83680, for the sum of TEN DOLLARS and other good and valuable consideration, the following described real property located in Boise County, Idaho, to wit:

Boise Meridian, Idaho

T. 7 N., R. 6 E., Section 35, Lot 1:

Together with an easement and right-of-way for a road, 30 feet in width, being 15 feet each side of center line, the center line being more particularly described as follows:

Beginning at the true point of beginning on the west boundary line of Lot 1, said point lying S.29°18' W., 15 feet from the northwest corner of lot 1:

thence along the following courses and distances,

N. 66°24'58" W., 26.08 feet; N65°59'10" W., 22.75 feet; N80°23'42" W., 127.45 feet, to the east boundary of Highway 21 right-of-way, the end of said right-of-way, containing 0.12 acres, more or less.

If the Regional Forester determines that the road, or any segment thereof, is no longer necessary, the easement transversed thereby shall terminate. Evidence for such termination shall be a statement in recordable form furnished by the appropriate Regional Forester to the Grantors or their successors or assigns in interest.

Containing 1.34 acres.

Including all improvements, buildings, fencing, irrigation equipment, furniture and fixtures.

SUBJECT, HOWEVER, to the following:

1. All easements and rights-of-way appearing on record or on the premises.
2. Mineral reservations appearing of record.
3. Covenants, restrictions and zoning regulations as appear of record or by use upon the premises.
4. Current real property taxes, irrigation assessments or other governmental assessments or charges.

SUBJECT TO taxes and assessments for the year 2000 and all subsequent years, together with any and all existing easements, rights-of-way, reservations, restrictions and encumbrances of record, to any existing tenancies, to all zoning laws and ordinances, and to any state of facts an accurate survey or inspection of the premises would show.

This conveyance shall include any and all appurtenances, tenements, hereditaments, reversions, remainders, easements, rights-of-way and water rights in anywise appertaining to the property herein described.

The Grantor covenant to the Grantee that he is the 50% owner of said premises; that the premises are free from all encumbrances, excepting those as may be herein set forth, and excepting those of record, and that he will warrant and defend the same from all lawful claims.

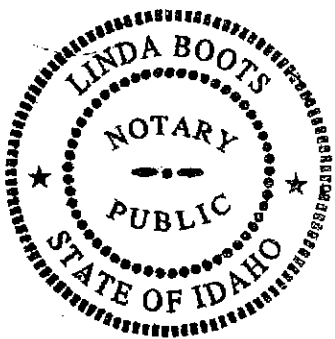
IN WITNESS WHEREOF, the Grantor has executed this instrument on this 18 day of July, 2000.

Carl V. Nicholson
Carl V. Nicholson

Patricia A. Nicholson
Patricia A. Nicholson

STATE OF IDAHO)
) ss
COUNTY OF ADA)

On this 18 day of July, 2000, before me, Linda Boots, a Notary Public, personally appeared CARL V. NICHOLSON and PATRICIA A. NICHOLSON, known or identified to me to be the persons whose names are subscribed to the within instrument, and acknowledged to me that they executed the same.



Linda Boots
Notary Public for Idaho
My Commission expires 05/31/01
Residing in Meridian, ID

The United States of America

To all to whom these presents shall come, Greeting:

IDI-26755

WHEREAS

Thomas T. Nicholson, Diane R. Nicholson,
Carl V. Nicholson, and Patricia A. Nicholson

are entitled to a Land Patent pursuant to the General Exchange Act of March 20, 1922 (42 Stat. 465), as amended by the Act of February 28, 1925 (43 Stat. 1090); and the Act of October 21, 1976 (90 Stat. 2743; 43 U.S.C. 1716), for the following-described lands:

Boise Meridian, Idaho
T. 7 N., R. 6 E.,
sec. 35, lot 1.

Together with an easement and right-of-way for a road, 30 feet in width, being 15 feet each side of center line, the center line being more particularly described as follows:

Beginning at the true point of beginning on the west boundary line of lot 1, said point lying S. 29°18' W., 15 feet from the northwest corner of lot 1;

thence along the following courses and distances,

N. 66°24'58" W., 26.08 feet;

N. 65°59'10" W., 22.75 feet;

N. 80°23'42" W., 127.45 feet, to the east boundary of Highway 21 right-of-way, the end of said right-of-way, containing 0.12 acres, more or less.

If the Regional Forester determines that the road, or any segment thereof, is no longer necessary, the easement traversed thereby shall terminate. Evidence for such termination shall be a statement in recordable form furnished by the appropriate Regional Forester to the Grantors or their successors or assigns in interest.

Containing 1.34 acres.

NOW KNOW YE, that there is, therefore, granted by the UNITED STATES, unto the above-named claimants, the lands above described; TO HAVE AND TO HOLD the said land with all the rights, privileges, immunities and appurtenances, of whatsoever nature, thereunto belonging, unto the said claimants, their successors and assigns forever;

EXCEPTING AND RESERVING TO THE UNITED STATES a right-of-way thereon for ditches or canals constructed by the authority of the United States pursuant to the Act of August 30, 1890 (26 Stat. 391; 43 U.S.C. 945).

Boise County Idaho ss
Request of

Tom Nicholson

Time 9:37 M.T

Date 12/6/89

135183

Arlene C. Kolar

By *Nola Yonker*
Deputy

Fee \$6.00



IN TESTIMONY WHEREOF, the undersigned authorized officer of the Bureau of Land Management, in accordance with the provisions of the Act of June 17, 1948 (62 Stat. 476), has, in the name of the United States, caused these letters to be made Patent, and the Seal of the Bureau to be hereunto affixed.

GIVEN under my hand, in Boise, Idaho
the FIFTH day of DECEMBER in the year
of our Lord one thousand nine hundred and EIGHTY-NINE
and of the Independence of the United States the two hundred
and FOURTEENTH

By *John W. Davis*
Deputy State Director for Operations

CERTIFICATE OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE BUREAU OF HEALTH POLICY AND VITAL STATISTICS

DATE FILED BY STATE REGISTRAR:

State of Idaho

CERTIFICATE OF DEATH

STATE FILE NO.

2002-03202

MAY 06 2003

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR WITH THE DEPARTMENT OF HEALTH AND WELFARE, SHALL BE USED AS PROOF OF THE DEATH UNDER 26-2101 AND 26-272, IDAHO CODE.

Local Reg. No.

DECEDENT TYPE OR PRINT IN PERMANENT BLACK INK. DO NOT USE FELT TIP PEN. FOR INSTRUCTIONS SEE HANDBOOKS	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) BLANCHE TAYLOR NICHOLSON		2. SEX FEMALE	3. SOCIAL SECURITY NUMBER 518-84-0311
	4a. AGE-Last Birth-day 90 (Years)		4b. UNDER 1 YEAR Months: 0 Days: 0 Hours: 0 Minutes: 0	
MORTICIAN: Complete/Verify and File Within 5 Days of Death	5. DATE OF BIRTH (Mo/Day/Yr) JUNE 22, 1912		6. BIRTHPLACE (City and State, Territory, or Foreign Country) MALTA, IDAHO	
	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY ADA	
PARENTS	7c. CITY OR TOWN BOISE		7d. STREET AND NUMBER 11 MESA VISTA DRIVE	
	7e. APT. NO. 83705		7f. ZIP CODE 83705	
INFORMANT	8. MARITAL STATUS AT TIME OF DEATH ☐ Married ☐ Married, but separated ☒ Widowed ☐ Divorced ☐ Never married ☐ Unknown		9. SURVIVING SPOUSE'S NAME (If wife, give maiden name) N/A	
	10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11a. FATHER'S NAME (First, Middle, Last, Suffix) THOMAS TAYLOR, JR.	
DISPOSITION	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) CAROLINE NELSON		11b. BIRTHPLACE (State, Territory, or Foreign Country) UTAH	
	13a. INFORMANT'S NAME (Type or print) JOAN NICHOLSON		13b. RELATIONSHIP TO DECEDENT DAUGHTER	
PLACE OF DEATH	14. METHOD OF DISPOSITION ☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) MORRIS HILL CEMETERY BOISE, IDAHO	
	16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY RELYEA FUNERAL CHAPEL 318 N. LATAH BOISE, IDAHO 83706		17. LICENSE NUMBER (Of licensee) M-830	
DATE OF DEATH	18. WAS CORONER CONTACTED? ☐ Yes ☒ No		19. IF DEATH OCCURRED IN A HOSPITAL: ☒ Inpatient ☐ ER/Outpatient ☐ DCA ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)	
	20. FACILITY NAME (If not facility, give street and number) 11 MESA VISTA DR. (RESIDENCE)		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE BOISE, 83705	
CAUSE OF DEATH	22. COUNTY OF DEATH ADA		23. DATE OF DEATH (Mo/Day/Yr) (Spell month) APRIL 29, 2003	
	24. TIME OF DEATH 2307 (24hr)		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) APRIL 29, 2003	
CERTIFIER: Complete Within 72 Hours of Death	26. TIME PRONOUNCED DEAD 2307 (24hr)			
	27. CAUSE OF DEATH PART I. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line: IMMEDIATE CAUSE (Final disease or condition resulting in death) a. Alzheimer's Disease Sequitely list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE LAST (disease or injury that initiated the events resulting in death) b. 3 yrs PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I.			
ITEMS 28-38 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	28. DID TOBACCO USE CONTRIBUTE TO DEATH? ☒ Yes ☐ Probably ☐ Unknown		29. IF FEMALE (Aged 10-54): ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death	
	30. IF FEMALE (Aged 10-54): ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year		31. MANNER OF DEATH ☒ Natural ☐ Accident ☐ Suicide ☐ Could not be determined	
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	32. DATE OF INJURY (Mo/Day/Yr) (Spell month)		33. TIME OF INJURY 2307 (24hr)	
	34. PLACE OF INJURY (Decedent's home, farm, street, construction site, restaurant, forest, etc.)		35. INJURY AT WORK? ☐ Yes ☒ No	
REGISTRAR	36. LOCATION OF INJURY: State _____ City/Town or County _____ Zip Code _____		37. DESCRIBE HOW INJURY OCCURRED. IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) SPECIFY WHICH VEHICLE DECEDENT OCCUPIED, if applicable	
	38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)		38b. WHAT SAFETY DEVICE(S) DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown	
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s) manner stated. ☐ CORONER - On the basis of examination and investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.		39b. LICENSE NUMBER 14808	
	Signature and Title of Certifier DR. MICHAEL K. MATER, M.D. 3301 N. SAWGRASS BOISE, IDAHO 83704		39c. DATE SIGNED 5/1/03	
REGISTRAR	40a. CORONER'S SUBSEQUENT SIGNATURE IF NECESSARY: The coroner's signature in this item supersedes that of the physician, and the coroner becomes the certifier of record.		40b. DATE SIGNED MM / DD / YYYY	
	41a. REGISTRAR'S SIGNATURE Sue Clark		41b. DATE SIGNED MAY 06 2003	

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF HEALTH POLICY AND VITAL STATISTICS.

DATE ISSUED: **MAY 06 2003**

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

JANE S. SMITH
STATE REGISTRAR

97042805

ADA CO. RECORDER
J. DAVID NAVARRO
BOISE ID

Blanche Nicholson GENERAL POWER OF ATTORNEY

'97 JUN 2 PM 1 41

FEE 15.00
RECORDED THOMAS E. NICHOLSON

I, BLANCHE NICHOLSON, of Boise, Idaho, designate and appoint THOMAS E. NICHOLSON of Boise, Idaho and CARL V. NICHOLSON of Kuna, Idaho, as my attorney in fact and agent (hereinafter collectively referred to as "agent") to act in my name and for my benefit. I grant to my agent full power and authority to do everything necessary in exercising any of the powers herein granted as fully as I might or could do if personally present and fully competent, hereby ratifying and confirming all that my agent shall lawfully do or cause to be done by virtue of this power of attorney and the powers herein granted.

1. **GENERAL GRANT OF POWER:** My agent shall have power to exercise or perform any act, power, duty, right or obligation whatsoever that I now have or may hereafter acquire, relating to any person, matter, transaction or property, real or personal, tangible or intangible, now owned or hereafter acquired by me, including, without limitation, the powers specifically enumerated in this instrument. Generally, my agent shall have power to do and perform all matters, transact all business, and make, execute and acknowledge all contracts, orders, deeds, mortgages, leases, assignments, assurances, and instruments of every kind which may be requisite or proper to effectuate the purposes of this general power of attorney.

2. **SPECIFIC POWERS:** Without in any way limiting the generality of the power and authority conferred upon my agent by this instrument, my agent shall have and may exercise each of the following specific powers:

(a) Power to Acquire and Sell. To acquire, purchase, exchange, grant options and sell, assign, release, convey, mortgage, hypothecate, lease, and accept and take possession of real and personal property and interests therein, both tangible and intangible, upon such terms, conditions, and covenants as my agent shall deem proper; and to sign, seal, execute and deliver and acknowledge such deeds, leases, contracts, assignments, indentures, agreements, mortgages, deeds of trust, bills of sale, security agreements and related forms, exchange agreements, bills, bonds, notes, receipts, releases and satisfactions of mortgages, security interests, and judgments, and such other instruments in writing as shall be proper.

(b) Borrowing and Banking Powers. To borrow moneys on my behalf and to sign, seal, execute, deliver and acknowledge on my behalf such promissory notes, bills, bonds, or other evidence of indebtedness and such mortgages, deeds of trust, security agreements, pledges, or other documents to secure the payment of borrowed funds as my agent shall deem proper; to make, receive, and endorse checks and drafts;

to deposit and withdraw funds, acquire and redeem certificates of deposit, in banks, savings and loan associations, and other financial institutions; and to release such mortgages, deeds of trust, or other security instruments as may be necessary or proper in the exercise of the rights and powers herein granted.

(c) Powers of Collection and Payment. To forgive, request, demand, sue for, recover, collect, receive and hold all sums of money, debts, dues, commercial papers, checks, drafts, accounts, deposits, legacies, bequests, devises, notes, interests, stock certificates, bonds, dividends, certificates of deposit, annuities, pension, profit sharing, retirement, social security, medicare, insurance, and other contractual benefits and proceeds, all documents of title, all property and property rights, real or personal, tangible and intangible, and demands whatsoever, liquidated or unliquidated, now or hereafter owned by, or due, owing, payable or belonging to, me or in which I have or may hereafter acquire an interest; to have, use, and take all lawful means and equitable and legal remedies and proceedings in my name and for the collection and recovery thereof including the enforcement of mortgages, deeds of trust and security instruments, and to adjust, sell, compromise, and agree to the same; to execute and deliver for me, on my behalf, and in my name, all endorsements, releases, receipts, or other sufficient discharges for the same; and to pay and discharge all debts and demands due and payable or which may hereafter become due and payable by me to any person or persons whomsoever.

(d) Management Powers. To maintain, repair, improve, invest, manage, insure, rent, lease, encumber, partition and in any manner deal with any real or personal property, tangible or intangible, or any interest therein, that I now own or may hereafter acquire, upon such terms and conditions as my agent shall deem proper, and to transfer any or all of my assets to the trustee of any revocable living trust which I may have created or which, under the power and authority conferred by this instrument, may be created by my agent for my benefit.

(e) Motor Vehicles. To apply for a certificate of title upon, and endorse and assign or transfer title to, any motor vehicle; and to represent in such assignment or transfer of title that the title to said motor vehicle is free and clear of all liens and encumbrances except those specifically set forth in such assignment or transfer of title.

(f) Business Interests. To conduct or participate in any lawful business of whatever nature; to execute partnership agreements and amendments thereto; to incorporate, reorganize, merge, consolidate, recapitalize, sell, liquidate or dissolve any business; to elect or employ officers, directors and agents; to carry out the provisions of any agreement for the sale of any business interest or the stock therein; and to exercise

voting rights with respect to stock, either in person or by proxy, and exercise stock options.

(g) Tax Powers. To represent me in all tax matters; to prepare, sign, and file federal, state, and/or local income, gift and other tax returns of all kinds, including, where appropriate, joint returns, FICA returns, payroll tax returns, claims for refunds, requests for extensions of time to file returns and/or pay taxes, extensions and waivers of applicable periods of limitation, protests and petitions to administrative agencies or courts, including the tax court, regarding tax matters, and any and all other tax related documents, including but not limited to consents and agreements under Section 2032A of the Internal Revenue Code or any successor section thereto and consents to split gifts, closing agreements, and any power of attorney form required by the Internal Revenue Service and/or any state and/or local taxing authority with respect to any tax year between the years 1980 and 2050; to pay taxes due, collect and make such disposition of refunds as my agent shall deem appropriate, post bonds, receive confidential information and contest deficiencies determined by the Internal Revenue Service and/or any state and/or local taxing authority; to exercise any elections I may have under federal, state or local tax law; to allocate any generation-skipping tax exemption to which I am entitled; and generally to represent me or obtain professional representation for me in all tax matters and proceedings of all kinds and for all periods between the years 1980 and 2050 before all officers of the Internal Revenue Service and state and local authorities and in any and all courts; to engage, compensate and discharge attorneys, accountants and other tax and financial advisers and consultants to represent and/or assist me in connection with any and all tax matters involving or in any way related to me or any property in which I have or may have an interest or responsibility. The principal's social security number is 518-84-0311.

(h) Safe Deposit Boxes. To have access at any time or times to any safe deposit box rented by me, wheresoever located, and to remove all or any part of the contents thereof, and to surrender or relinquish said safe deposit box; and any institution in which any such safe deposit box may be located shall not incur any liability to me or my estate as a result of permitting my agent to exercise this power.

(i) Fund Trusts. To transfer from time to time and at any time to the trustee or trustees of any revocable trust agreement created by me before or after the execution of this instrument, as to which trust I am, during my lifetime, primary income and principal beneficiary, any or all of my cash, property or interests in property, including any rights to receive income from any source; and for this purpose to enter and remove from any safe-deposit box of mine (whether the box is registered in my name alone or jointly with one or more other persons) any of my cash or property and to execute such instruments, documents and papers to effect the transfers described herein

as may be necessary, appropriate, incidental or convenient; to make such transfers absolutely in fee simple or for my lifetime only with the remainder or reversion (of the property so transferred) remaining in me so that such property will be disposed of at my death by my will or by the intestacy laws of the state in which I shall die a resident.

(j) Gifts. To make gifts, grants or other transfers without consideration either outright or in trust (including the forgiveness of indebtedness) to such persons, including my agent, or organizations as my Agent shall select; provided, however, that my Agent shall not make gifts to my Agent unless such gifts are consistent with my estate plan and pattern of gifting prior to my incapacity or disability; provided further, however, that gifts made by my Agent to a charitable, scientific, or educational institution or organization must qualify for a charitable deduction under the income and gift tax provisions of the Internal Revenue Code as from time to time amended.

3. **INTERPRETATION:** This instrument shall be construed and interpreted as a general power of attorney. The enumeration of specific powers herein is not intended to, nor does it, limit or restrict the general powers herein granted to my agent.

4. **DISABILITY OF PRINCIPAL:** This General Power of Attorney shall not be affected by subsequent disability or incapacity of the principal.

5. **SUCCESSOR AGENT:** In the event either THOMAS E. NICHOLSON or CARL V. NICHOLSON fails to qualify or ceases to act as a co-agent, I appoint the remaining or surviving one of them to be my sole successor agent with the same powers and authority as herein set forth for my agent.

6. **THIRD PARTY RELIANCE:** Third parties may rely upon the representations of my agent as to all matters relating to any power granted to my agent, and no person who shall act in reliance upon the representations of my agent or the authority granted to my agent shall incur any liability to me or my estate as a result of permitting my agent to exercise any power.

7. **APPOINTMENT OF CONSERVATOR:** In the event it becomes necessary to have a conservator appointed over the assets of my estate, even though I have this power of attorney, I nominate the persons who are appointed as my agent under this power of attorney, in the priority that they have been appointed in this power of attorney to serve as my agent or successor agent, to be my conservator. If I am not permitted by law to so nominate and appoint my conservator, then I request in the strongest possible terms that any court of competent jurisdiction which may receive and

be asked to act upon a petition by any person to appoint a guardian, conservator or similar representative for me give the greatest possible weight to this request.

8. **GOVERNING LAW:** This General Power of Attorney is executed and delivered in the State of Idaho and the laws of the State of Idaho shall govern all questions as to the validity of this power and as to the construction of its provisions.

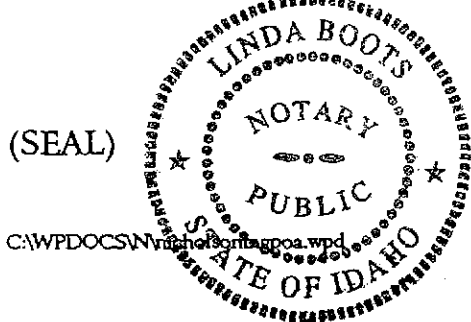
IN WITNESS WHEREOF, I have executed this General Power of Attorney this 30th day of OCTOBER, 1996.

Blanche Nicholson
Blanche Nicholson
Principal

STATE OF IDAHO)
 : ss.
County of ~~Canyon~~ Adair)

On this 30 day of October, 1996, before me, the undersigned, a Notary Public in and for said State, personally appeared Blanche Nicholson, known to me or identified to me to be the person whose name is subscribed to the within General Power of Attorney and acknowledged to me that she executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year in this certificate first above written.



Linda Boots
Notary Public for Idaho
Commission expires: 5/31/01

97042804

ADA CO. RECORDER
J. DAVID NAVARRO
BOISE ID

Carl Nicholson

GENERAL POWER OF ATTORNEY

'97 JUN 2 PM 1 41

FEE 15.00
RECEIVED
THOMAS E. NICHOLSON of Boise, Idaho and CARL V. NICHOLSON of Kuna, Idaho, as my attorney in fact and agent (hereinafter collectively referred to as "agent") to act in my name and for my benefit. I grant to my agent full power and authority to do everything necessary in exercising any of the powers herein granted as fully as I might or could do if personally present and fully competent, hereby ratifying and confirming all that my agent shall lawfully do or cause to be done by virtue of this power of attorney and the powers herein granted.

1. **GENERAL GRANT OF POWER:** My agent shall have power to exercise or perform any act, power, duty, right or obligation whatsoever that I now have or may hereafter acquire, relating to any person, matter, transaction or property, real or personal, tangible or intangible, now owned or hereafter acquired by me, including, without limitation, the powers specifically enumerated in this instrument. Generally, my agent shall have power to do and perform all matters, transact all business, and make, execute and acknowledge all contracts, orders, deeds, mortgages, leases, assignments, assurances, and instruments of every kind which may be requisite or proper to effectuate the purposes of this general power of attorney.

2. **SPECIFIC POWERS:** Without in any way limiting the generality of the power and authority conferred upon my agent by this instrument, my agent shall have and may exercise each of the following specific powers:

(a) Power to Acquire and Sell. To acquire, purchase, exchange, grant options and sell, assign, release, convey, mortgage, hypothecate, lease, and accept and take possession of real and personal property and interests therein, both tangible and intangible, upon such terms, conditions, and covenants as my agent shall deem proper; and to sign, seal, execute and deliver and acknowledge such deeds, leases, contracts, assignments, indentures, agreements, mortgages, deeds of trust, bills of sale, security agreements and related forms, exchange agreements, bills, bonds, notes, receipts, releases and satisfactions of mortgages, security interests, and judgments, and such other instruments in writing as shall be proper.

(b) Borrowing and Banking Powers. To borrow moneys on my behalf and to sign, seal, execute, deliver and acknowledge on my behalf such promissory notes, bills, bonds, or other evidence of indebtedness and such mortgages, deeds of trust, security agreements, pledges, or other documents to secure the payment of borrowed funds as my agent shall deem proper; to make, receive, and endorse checks and drafts;

to deposit and withdraw funds, acquire and redeem certificates of deposit, in banks, savings and loan associations, and other financial institutions; and to release such mortgages, deeds of trust, or other security instruments as may be necessary or proper in the exercise of the rights and powers herein granted.

(c) Powers of Collection and Payment. To forgive, request, demand, sue for, recover, collect, receive and hold all sums of money, debts, dues, commercial papers, checks, drafts, accounts, deposits, legacies, bequests, devises, notes, interests, stock certificates, bonds, dividends, certificates of deposit, annuities, pension, profit sharing, retirement, social security, medicare, insurance, and other contractual benefits and proceeds, all documents of title, all property and property rights, real or personal, tangible and intangible, and demands whatsoever, liquidated or unliquidated, now or hereafter owned by, or due, owing, payable or belonging to, me or in which I have or may hereafter acquire an interest; to have, use, and take all lawful means and equitable and legal remedies and proceedings in my name and for the collection and recovery thereof including the enforcement of mortgages, deeds of trust and security instruments, and to adjust, sell, compromise, and agree to the same; to execute and deliver for me, on my behalf, and in my name, all endorsements, releases, receipts, or other sufficient discharges for the same; and to pay and discharge all debts and demands due and payable or which may hereafter become due and payable by me to any person or persons whomsoever.

(d) Management Powers. To maintain, repair, improve, invest, manage, insure, rent, lease, encumber, partition and in any manner deal with any real or personal property, tangible or intangible, or any interest therein, that I now own or may hereafter acquire, upon such terms and conditions as my agent shall deem proper, and to transfer any or all of my assets to the trustee of any revocable living trust which I may have created or which, under the power and authority conferred by this instrument, may be created by my agent for my benefit.

(e) Motor Vehicles. To apply for a certificate of title upon, and endorse and assign or transfer title to, any motor vehicle; and to represent in such assignment or transfer of title that the title to said motor vehicle is free and clear of all liens and encumbrances except those specifically set forth in such assignment or transfer of title.

(f) Business Interests. To conduct or participate in any lawful business of whatever nature; to execute partnership agreements and amendments thereto; to incorporate, reorganize, merge, consolidate, recapitalize, sell, liquidate or dissolve any business; to elect or employ officers, directors and agents; to carry out the provisions of any agreement for the sale of any business interest or the stock therein; and to exercise

voting rights with respect to stock, either in person or by proxy, and exercise stock options.

(g) Tax Powers. To represent me in all tax matters; to prepare, sign, and file federal, state, and/or local income, gift and other tax returns of all kinds, including, where appropriate, joint returns, FICA returns, payroll tax returns, claims for refunds, requests for extensions of time to file returns and/or pay taxes, extensions and waivers of applicable periods of limitation, protests and petitions to administrative agencies or courts, including the tax court, regarding tax matters, and any and all other tax related documents, including but not limited to consents and agreements under Section 2032A of the Internal Revenue Code or any successor section thereto and consents to split gifts, closing agreements, and any power of attorney form required by the Internal Revenue Service and/or any state and/or local taxing authority with respect to any tax year between the years 1980 and 2050; to pay taxes due, collect and make such disposition of refunds as my agent shall deem appropriate, post bonds, receive confidential information and contest deficiencies determined by the Internal Revenue Service and/or any state and/or local taxing authority; to exercise any elections I may have under federal, state or local tax law; to allocate any generation-skipping tax exemption to which I am entitled; and generally to represent me or obtain professional representation for me in all tax matters and proceedings of all kinds and for all periods between the years 1980 and 2050 before all officers of the Internal Revenue Service and state and local authorities and in any and all courts; to engage, compensate and discharge attorneys, accountants and other tax and financial advisers and consultants to represent and/or assist me in connection with any and all tax matters involving or in any way related to me or any property in which I have or may have an interest or responsibility. The principal's social security number is 519-42-2532.

(h) Safe Deposit Boxes. To have access at any time or times to any safe deposit box rented by me, wheresoever located, and to remove all or any part of the contents thereof, and to surrender or relinquish said safe deposit box; and any institution in which any such safe deposit box may be located shall not incur any liability to me or my estate as a result of permitting my agent to exercise this power.

(i) Fund Trusts. To transfer from time to time and at any time to the trustee or trustees of any revocable trust agreement created by me before or after the execution of this instrument, as to which trust I am, during my lifetime, primary income and principal beneficiary, any or all of my cash, property or interests in property, including any rights to receive income from any source; and for this purpose to enter and remove from any safe-deposit box of mine (whether the box is registered in my name alone or jointly with one or more other persons) any of my cash or property and to execute such instruments, documents and papers to effect the transfers described herein

as may be necessary, appropriate, incidental or convenient; to make such transfers absolutely in fee simple or for my lifetime only with the remainder or reversion (of the property so transferred) remaining in me so that such property will be disposed of at my death by my will or by the intestacy laws of the state in which I shall die a resident.

(j) Gifting. To make gifts, grants or other transfers without consideration either outright or in trust (including the forgiveness of indebtedness) to such persons, including my agent, or organizations as my Agent shall select; provided, however, that my Agent shall not make gifts to my Agent unless such gifts are consistent with my estate plan and pattern of gifting prior to my incapacity or disability; provided further, however, that gifts made by my Agent to a charitable, scientific, or educational institution or organization must qualify for a charitable deduction under the income and gift tax provisions of the Internal Revenue Code as from time to time amended.

3. **INTERPRETATION:** This instrument shall be construed and interpreted as a general power of attorney. The enumeration of specific powers herein is not intended to, nor does it, limit or restrict the general powers herein granted to my agent.

4. **DISABILITY OF PRINCIPAL:** This General Power of Attorney shall not be affected by subsequent disability or incapacity of the principal.

5. **SUCCESSOR AGENT:** In the event either THOMAS E. NICHOLSON or CARL V. NICHOLSON fails to qualify or ceases to act as a co-agent, I appoint the remaining or surviving one of them to be my sole successor agent with the same powers and authority as herein set forth for my agent.

6. **THIRD PARTY RELIANCE:** Third parties may rely upon the representations of my agent as to all matters relating to any power granted to my agent, and no person who shall act in reliance upon the representations of my agent or the authority granted to my agent shall incur any liability to me or my estate as a result of permitting my agent to exercise any power.

7. **APPOINTMENT OF CONSERVATOR:** In the event it becomes necessary to have a conservator appointed over the assets of my estate, even though I have this power of attorney, I nominate the persons who are appointed as my agent under this power of attorney, in the priority that they have been appointed in this power of attorney to serve as my agent or successor agent, to be my conservator. If I am not permitted by law to so nominate and appoint my conservator, then I request in the strongest possible terms that any court of competent jurisdiction which may receive and

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
CENTER FOR VITAL STATISTICS AND HEALTH POLICY

Amended Items #11, #12a-10/18/2000 sc
OCT 13 2000

State of Idaho CERTIFICATE OF DEATH

State File No. **7100**
Local Reg. No. _____

TYPE OR PRINT IN PERMANENT BLACK INK. DO NOT USE FELT TIP PEN. NAME OF DECEDENT For use by physician or investigator	DECEDENT - NAME FIRST: CARL MIDDLE: EMIL LAST: NICHOLSON		SEX: MALE	DATE OF DEATH (Month, Day, Year) OCTOBER 5, 2000
	SOCIAL SECURITY NUMBER 519-42-2532		AGE - Last Birthday (Yr.) 93	DATE OF BIRTH (Month, Day, Year) MAR. 18, 1907
	PLACE OF DEATH (Check only one) ☐ Hospital ☐ (1) Inpatient ☐ (2) Outpatient ☐ (3) D.O.A. ☐ (4) Long-Term Care Facility ☐ (5) Own Residence ☐ (6) Other Private Residence ☐ (7) Other (Specify) _____		BIRTHPLACE (City and State or Foreign Country) BOISE, IDAHO	
	FACILITY NAME AND ADDRESS (If not a hospital, enter name of place, street and number) (RESIDENCE) #11 MESA VISTA DRIVE		CITY, TOWN OR LOCATION OF DEATH BOISE	
MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) MARRIED		SURVIVING SPOUSE (If wife, give maiden name) BLANCHE Taylor		COUNTY OF DEATH ADA
RESIDENCE STATE IDAHO		RESIDENCE COUNTY ADA		RESIDENCE CITY, TOWN OR LOCATION BOISE
INSIDE CITY (LIMITS) ☒ Yes ☐ No		WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.) ☐ Yes ☒ No		RACE - American Indian, Black, Japanese, White, etc. (Specify) WHITE
DECEASED'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) RANCHER/WOOD CROWDER		KIND OF BUSINESS / INDUSTRY RANCHING		DECEASED'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (9-12) ☒ College (1-4 or 5+) ☐
FATHER - NAME CHARLES EMIL NICHOLSON		BIRTHPLACE SWEDEN		MOTHER - FULL MAIDEN NAME KATE SANDERSON
INFORMATION NAME (Type/Print) JOAN NICHOLSON		MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) #11 MESA VISTA DRIVE, BOISE, IDAHO 83705		BIRTHPLACE IDAHO
METHOD OF DISPOSITION ☒ Burial ☐ Cremation ☐ Removal from Idaho ☐ Donation ☐ Other (Specify) _____		PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) MORRIS HILL CEMETERY		LOCATION - City or Town, State BOISE, IDAHO
SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH (License Number for Licensee) <i>[Signature]</i> M-687		NAME AND ADDRESS OF FACILITY RELYEA FUNERAL CHAPEL 318 N. LATAH, BOISE, IDAHO 83706		
TIME OF DEATH 9:45 pm		DATE PROMULGATED DEAD (Month, Day, Year) OCTOBER 5, 2000		MANNER OF DEATH (Check One) ☒ Natural ☐ Homicide ☐ Suicide ☐ Accident ☐ Pending Investigation ☐ Could Not Be Determined
27. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (Final disease or condition resulting in death) Respiratory Failure		Approximate Interval Between Onset and Death 2-3 days		
27. PART II. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part I. Progressive Aspiration		Approximate Interval Between Onset and Death 2-3 days		
27. PART III. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part I. CVA		Approximate Interval Between Onset and Death 2-3 days		
27. PART IV. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part I.		WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No		WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? ☐ Yes ☐ No
CERTIFIER (Check only one) ☒ PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated. ☐ CORONER - On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner as stated.				
SIGNATURE AND TITLE OF CERTIFIER <i>[Signature]</i>		LICENSE NUMBER M4804		DATE SIGNED (Month, Day, Year) 10/10/2000
NAME AND ADDRESS OF CERTIFIER (Type/Print) DR. MICHAEL K. MAIER, M.D., 3301 N. SAWGRASS, BOISE, IDAHO 83704				
DATE OF INJURY (Mo., Day, Yr.) HOUR OF INJURY DESCRIBE HOW INJURY OCCURRED		PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify) LOCATION (Street or Route Number, City/Town, or County, and State)		
INJURY AT WORK? ☐ Yes ☒ No		IF TRANSPORTATION ACCIDENT, Specify ☐ Driver ☐ Passenger ☐ Pedestrian ☐ Other		
CORONER'S ACTION I have reviewed and/or amended, and certified.		CORONER'S SIGNATURE <i>[Signature]</i>		DATE SIGNED (Month, Day, Year) OCT 13 2000
REGISTRAR'S SIGNATURE <i>[Signature]</i>		DATE FILED (Month, Day, Year) OCT 13 2000		

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED: **OCT 18 2000**

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

JANE S. SMITH
STATE REGISTRAR

be asked to act upon a petition by any person to appoint a guardian, conservator or similar representative for me give the greatest possible weight to this request.

8. **GOVERNING LAW:** This General Power of Attorney is executed and delivered in the State of Idaho and the laws of the State of Idaho shall govern all questions as to the validity of this power and as to the construction of its provisions.

IN WITNESS WHEREOF, I have executed this General Power of Attorney this 30th day of October, 1996.

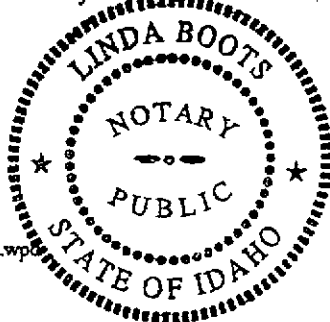
Carl E. Nicholson
Carl E. Nicholson
Principal

STATE OF IDAHO)
 : ss.
County of Canyon Idaho)

On this 30 day of October, 1996, before me, the undersigned, a Notary Public in and for said State, personally appeared Carl E. Nicholson, known to me or identified to me to be the person whose name is subscribed to the within General Power of Attorney and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year in this certificate first above written.

(SEAL)



Linda Boots
Notary Public for Idaho
Commission expires: 5/31/01

C:\WPDOCS\N\nicholsonc.gpoa.wpd

IDAHO DEPARTMENT OF WATER RESOURCES RECOMMENDED
WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 63-16375

NAME AND ADDRESS:

BLANCHE NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL E NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL V NICHOLSON
PO BOX 690
MERIDIAN ID 83680

THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83642-0690

*Emailed
SF5 to
Becky*

SOURCE: MORES CREEK Tributary: BOISE RIVER

QUANTITY: 0.020 CFS

0.000 AFY

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL
COMBINED DIVERSION RATE OF .02 CFS PER ACRE AT FIELD HEADGATE.

PRIORITY DATE: 05/01/1932

POINT OF DIVERSION:

~~T07N R06E S35 NWNESE~~
~~Within BOISE County~~

T07N R06E S35 NWNESE Lot 7
Within BOISE County

PURPOSE AND
PERIOD OF USE:

Purpose of use

Period of use:

Quantity:

IRRIGATION

04/15 10/31

0.020 CFS

PLACE OF USE: IRRIGATION within BOISE County

~~T07N R06E S35 NWSE 1.0~~T07N R06E S35 NWSE Lot 1 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: BASIS OF CLAIM - Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E35S8300A, LAND PATENT NO. 11-90-0011.

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

Right Number: 63-16375

Name and Address: THOMAS T NICHOLSON
PO BOX 690
MERIDIAN, ID 83642-0690

CARL E NICHOLSON
BLANCHE NICHOLSON
CARL V NICHOLSON
PO BOX 690
MERIDIAN, ID 83680

Source: MORES CREEK Tributary: BOISE RIVER

Quantity: .02 CFS

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL
COMBINED DIVERSION RATE OF .02 CFS PER ACRE AT FIELD HEADGATE.

Priority Date: 05-01-1932

Diversion Point: T07N R06E S35 Lot 7 (NWNESE) Within Boise County

Purpose and Period of Use:	Purpose of Use	Period of Use	Quantity
	Irrigation	04-15 TO 10-31	.02 CFS

Place of Use: Irrigation Within Boise County
T07N R06E S35 Lot 1 (NWSE) 1
1 Acres Total

Other Provisions Necessary for Definition / 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: Basis of Claim - Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E358300A, LAND PATENT NO.
11-90-0011.

1 21960 Recon USFS
D/C All Min

2 23.68 1 36.33

MS 891

24115
D/C

1 21.00 2 35.50

MS 2695

2

3 37.70

4 10.30

5 25.48

D/C

6 36.50

7 28.60

IDI 26755
Recon USFS
No Min
12/5/1989
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Min Only

1 19290 50'

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Craig
RECEIVED

JAN 31 2003

Department of Water Resources

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS**

In Re SRBA

Case No. 39576

A. Subcase: 63-16375

**STANDARD FORM 1
OBJECTION**

Please fill in the following information:

B. NAME AND ADDRESS OF PERSON OBJECTING

Name: United States of America, Acting through the USDA Forest Service

Address: 550 West Fort Street
MSC 033
Boise, Idaho 83724

Daytime Phone: (208) 331-5943

Name and Address of Attorney, if any:

David L. Negri
550 West Fort Street
MSC 033
Boise, Idaho 83724

C. CLAIMANT OF WATER RIGHT AS LISTED IN THE DIRECTOR'S REPORT

Name: Thomas T. Nicholson

Address: Blanche Nicholson
Carl V. Nicholson
Carl E. Nicholson
PO Box 690
Meridian, ID 83680

D. I object to the following elements as recommended in the Director's Report.
(Please check the appropriate box(es)).

1. ☐ **Name and Address**
Should be:
2. ☐ **Source**
Should be:
3. ☐ **Quantity**
Should be:
4. ☐ **Priority Date**
Should be:
5. ☒ **Point(s) of Diversion**
Should be: Lot 7. See E below
6. ☐ **Instream Flow Description**
Should be:
7. ☐ **Purpose(s) of Use**
Should be:
8. ☐ **Period of Year**
Should be:
9. ☒ **Places of Use**
Should be: Lot 1. See E below.

11. I object because:

- ☐ This water right should not exist.
- ☐ This water right was not recommended, but should be recommended with the elements described above.

E. **REASONS SUPPORTING OBJECTION(S):**

The point of diversion shown on the Directors Report Recommendation is on National Forest System Land. The claimant is not authorized to occupy and use National Forest System lands for this purpose. This section was recently 'relotted' to reflect consummated and pending land exchanges with the claimants.

F. VERIFICATION (Must be Completed)

State of Idaho)
) ss.
County of Ada)

Michael Collette , duly sworn, upon oath, deposes and says:
(Name of person filing objection)

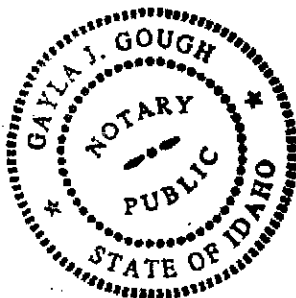
That I am the party/claimant filing this objection, as defined by I.C. §§ 42-1401A(1) and (6) or that I am the attorney for the party/claimant objecting and that I have read this objection, know its contents and believe that the statements are true to the best of my knowledge.

Michael Collette
(Signature of person filing objections)

David Noy
(Attorney signing in representative capacity)

Subscribed and sworn before me on:

January 30, 2003
Gayla J. Gough



Notary Public for: Idaho
Residing at: Kuna, Idaho
Commission Expires: 11/17/2004

INSTRUCTIONS FOR MAILING

You must mail the objection to the Clerk of the Court. FAX filings will not be accepted. You must also send a copy to all the parties listed below in the Certificate of Mailing.

G. CERTIFICATE OF MAILING

I certify that on 1/30/03, I mailed the original and copies of this objection, including all attachments, to the following persons:

1. Original to:

Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

2. One copy to the claimant of the water right at the following address:

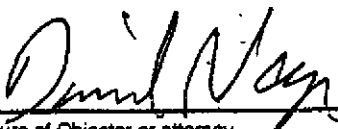
Name: Thomas T. Nicholson
Address: Blanche Nicholson
Carl V. Nicholson
Carl E. Nicholson
PO Box 690
Meridian, ID 83680

3. Copies to:

IDWR Document Depository
PO Box 83720
Boise, ID 83720-0098

Chief, Natural Resource
Division
Office of the Attorney General
State of Idaho
PO Box 44449
Boise, ID 83711-4449

United States Department of Justice
Environment and Natural Resources Division
550 West Fort Street, MSC 033
Boise, ID 83724



Signature of Objector or attorney
mailing on Objector's behalf

02/13/2002

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

RIGHT NUMBER: 63-16375

NAME AND ADDRESS: BLANCHE NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL V NICHOLSON
PO BOX 690
MERIDIAN ID 83680

THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL E NICHOLSON
PO BOX 690
MERIDIAN ID 83680

SOURCE: MORES CREEK

TRIBUTARY: BOISE RIVER

QUANTITY: 0.02 CFS

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL COMBINED
DIVERSION RATE OF .02 CFS PER ACRE AT FIELD HEADGATE.

PRIORITY DATE: 05/01/1932

POINT OF DIVERSION:

T07N R06E S35 NWNESE Within BOISE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

IRRIGATION

04/15 10/31

0.020 CFS

PLACE OF USE: IRRIGATION Within BOISE County

T07N R06E S35 NWSE 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.

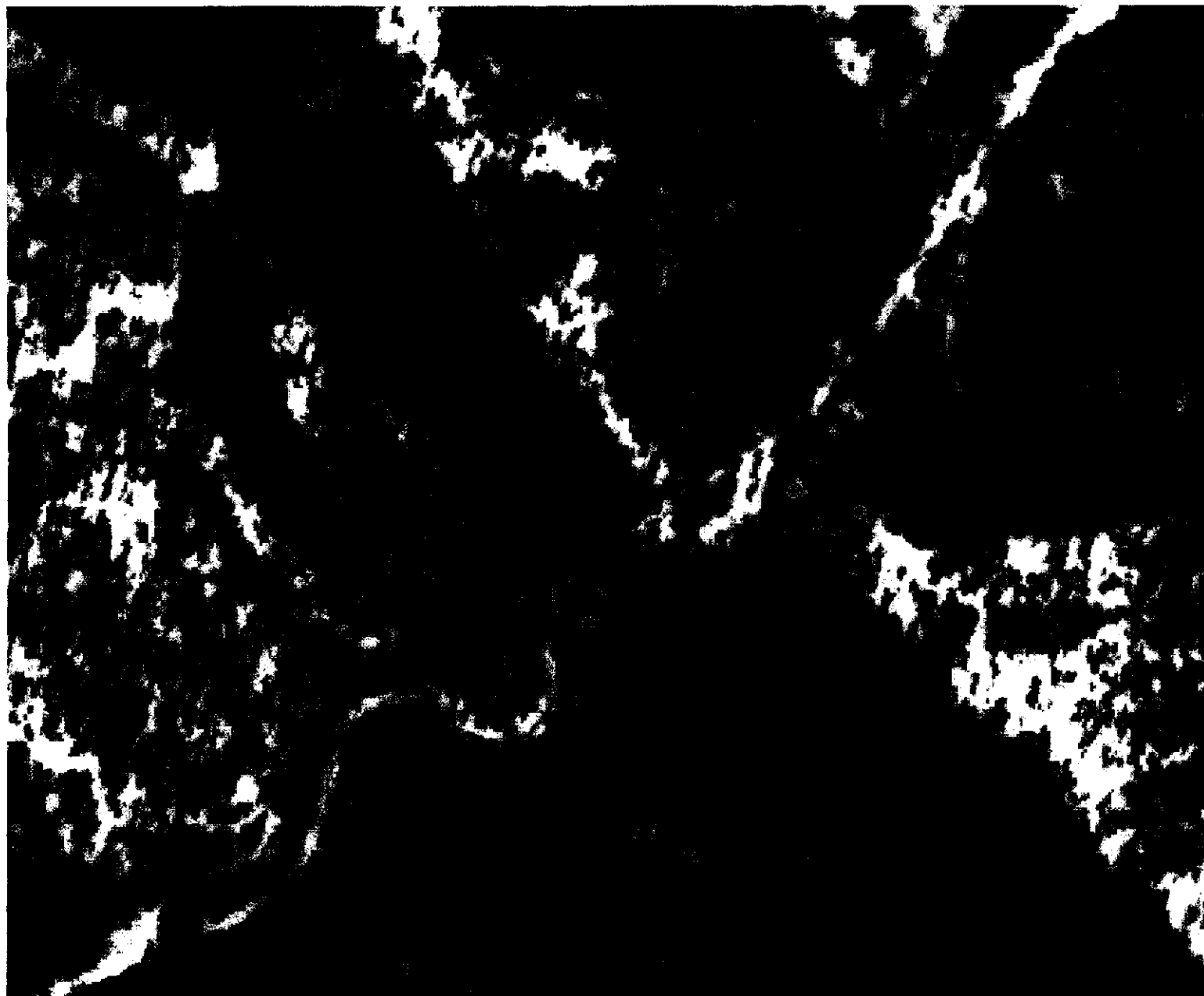
EXPLANATORY MATERIAL: Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E358300A, LAND PATENT NO.
11-90-0011.

IDAHO DEPT OF WATER RESOURCES

Claim No(s) 63-16373
63-16375
T07N, R06E, Sec 35
Prepared by: Maria Minicucci
February 12, 2002

-  Place of use
-  Point of diversion
-  Section Lines
- Quarter quarter lines



400 0 400 800 Feet



1987 NAPP

02/04/2002

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

RIGHT NUMBER: 63-16375
NAME AND ADDRESS: BLANCHE NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL V NICHOLSON
PO BOX 690
MERIDIAN ID 83680

THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL E NICHOLSON
PO BOX 690
MERIDIAN ID 83680

SOURCE: MORES CREEK TRIBUTARY: BOISE RIVER

QUANTITY: 0.02 CFS

USE OF THIS RIGHT WITH RIGHT NO. 63-16373 IS LIMITED TO A TOTAL COMBINED
DIVERSION RATE OF .02 CFS.

PRIORITY DATE: 05/01/1932

POINT OF DIVERSION:

T07N R06E S35 NWNESE Within BOISE County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
IRRIGATION	04/15 10/31	0.020 CFS

PLACE OF USE: IRRIGATION Within BOISE County

T07N R06E S35 NWSE

1 Acre

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.

~~THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.~~

EXPLANATORY MATERIAL: Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E358300A, LAND PATENT NO.
11-90-0011.

IDAHO DEPARTMENT OF WATER RESOURCES 01/28/2002
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

Water Right 63-16375

NAME AND ADDRESS: BLANCHE NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL V NICHOLSON
PO BOX 690
MERIDIAN ID 83680

THOMAS T NICHOLSON
PO BOX 690
MERIDIAN ID 83680

CARL E NICHOLSON
PO BOX 690
MERIDIAN ID 83680

SOURCE: MORES CREEK ✓

TRIBUTARY: BOISE RIVER ✓

QUANTITY: 0.02 CFS

PRIORITY DATE: 05/01/1932 ✓

POINT OF DIVERSION:

T07N R06E S35 NWNESE Within BOISE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
IRRIGATION

PERIOD OF USE
04/15 10/31

QUANTITY
0.020 CFS

PLACE OF USE:

IRRIGATION Within BOISE County
T07N R06E S35 NWSE

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

EXPLANATORY MATERIAL: Beneficial Use

PROPERTY ALSO KNOWN AS RP 07N06E358300A, LAND PATENT NO.
11-90-0011.

C18

*Same POU
as A63-16373.
When combined
cannot exceed
.02 CFS*

*See
#Need layout
& Conned SDE.
Check on # of acres,
in Season & rate*

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WESTERN REGION ADJUDICATION SECTION
CLAIM VERIFICATION FIELD EXAM SHEET
(Use with the ECVR)

CLAIM NO(s). A63-110375

1. No Change NAME IS SAME ✓
NEW OWNER: _____
No Change ADDRESS
NEW ADDRESS: _____

2. No Change - DATE OF PRIORITY: Completed evidence submitted
Incomplete - Claimant should be asked during the exam when was water first
used and submit proof of date of priority.

Priority date, per claimant, is: 05/01/1932
(If the priority date, based on your exam, seems questionable, explain below.)

Affidavit by claimant

3. No Change — SAME SOURCE
Source is different than that claimed:

Source found: More's Creek Trib. to Boise River

4. No Change — POINT OF DIVERSION
Point of diversion is different than the claim and/or new P/D's:

Township 7N Range 6E Section 35 1/4 NW 1/4 NE 1/4 SE
Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____

5. No Change - DESCRIPTION OF DIVERTING WORKS
Incomplete description, list below:

Cement head wall to open ditch to POU. At POU, low
wall has been built to contain & spread water to a
series of OUTLET pipes. Flood irrigation.

6. No Change - WATER USES
Different uses, (list uses found):

Use IRR From 4/15 To 10/31 Amount .02 CFS AFA
Use _____ From _____ To _____ Amount _____ CFS AFA
Use _____ From _____ To _____ Amount _____ CFS AFA

7. No Change - TOTAL VOLUME

Incomplete on claim, the total is, Amount _____ CFS _____ AFA

Changes found, the new total is, Amount _____ CFS _____ AFA

8. No Change - NON-IRRIGATION USES:

Changes Exam found:

Domestic # of homes: _____ Stock # _____ List types: _____

Additional comments: _____

9. No Change — PLACE OF USE: (If changed, list below.)

Use: IRR Township 7N Range 6E Section 35 1/4 NW 1/4 SE
Use: _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____
Use: _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____
Use: _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____

Remarks: (Comments pertinent to field examination) See additional attachment

Source data-entered incorrectly by IDWR. Correct source
is Jones Creek.

Additional photos of POU in A63-16373.

Property AKA RPO7N06E358300A, Land Patent No. 11-90-0011.

SYSTEM DIAGRAM INCLUDED

Shown on GIS Layout

NA

Same pov as
A63-16375.

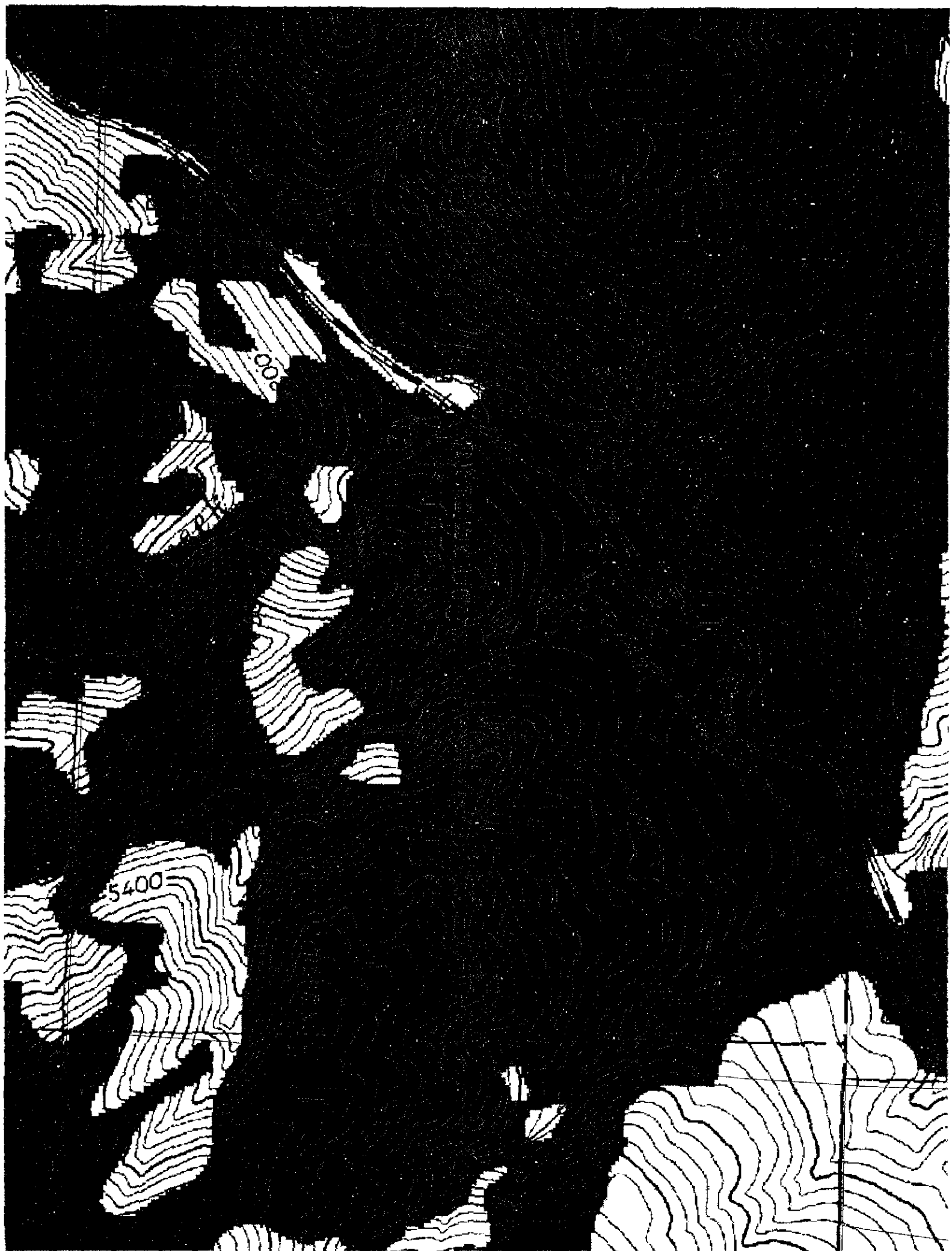
CK IF IN OFFICE EXAM
DATE EXAM CONDUCTED: 10/30/2001

FIELD EXAMINER:

MARIA MINICUCCI

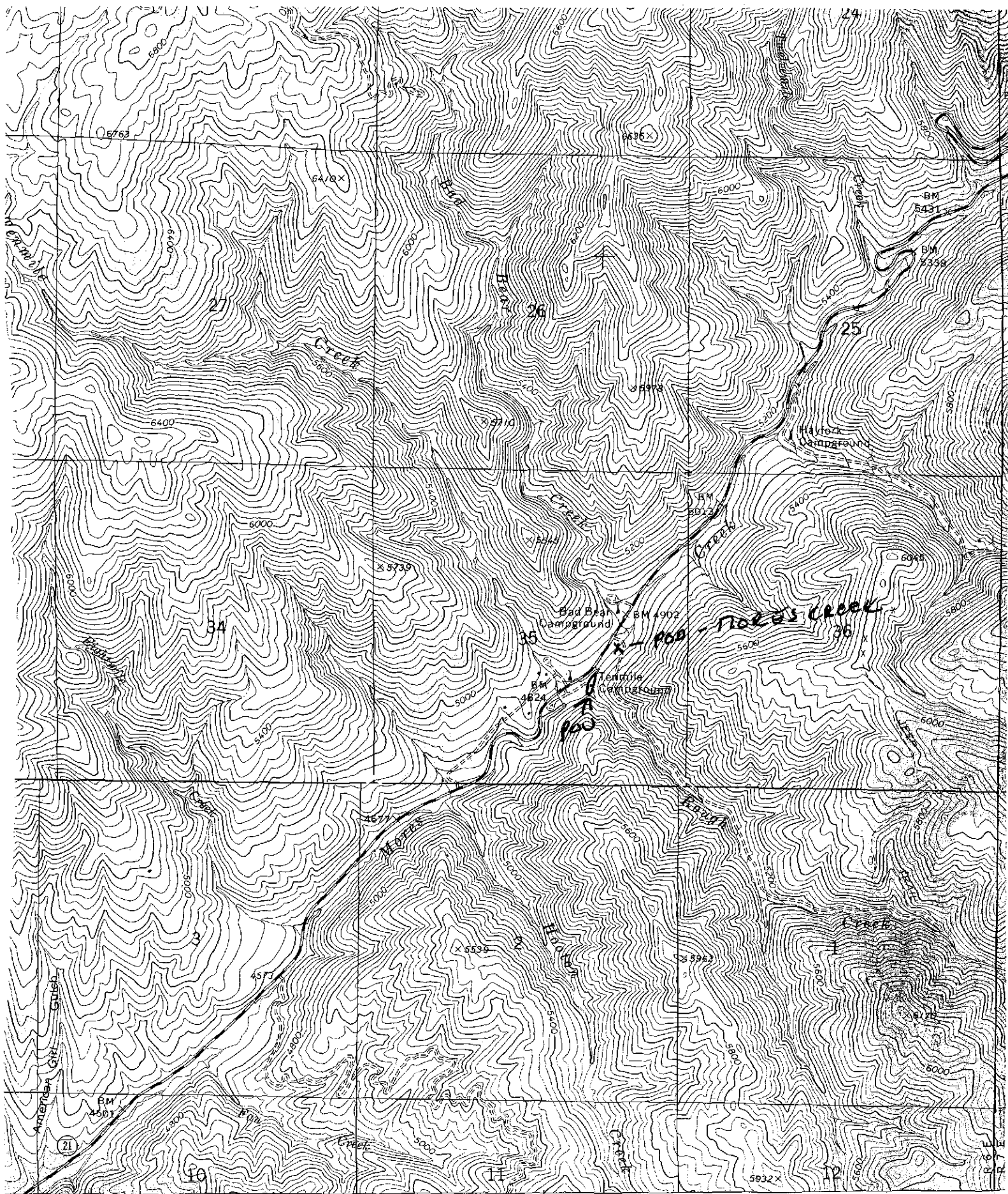
Print Name

[Signature]
Signature



DATE: 05/22/01
PAGE: 113

10/30/2001 w/SCOTT NI
2.6' x 1.9'
Headgate to
open ditch. At cabin
area ditch is piped to
low ~~or~~ stone wall w/imbedded
pipes that outlet to flood
irrigation.



IDAHO CITY 7 MI.
BOISE (U.S. 30) 47 MI.

edited, and published by the Geological Survey
JSGS and NOS/NOAA

by photogrammetric methods from aerial
s taken 1971. Field checked 1972

and 10,000-foot grid ticks: Idaho coordinate
st line (transverse Mercator)

0° 55' 16 MILS
18 1/2° 329 MILS

SUNSET TN (1972)

SCALE 1:24 000

CONTOUR INTERVAL 40

SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer R. PINICUCCI
D. BUFFINGTON

Legal Description 77N R6E S35 NESE

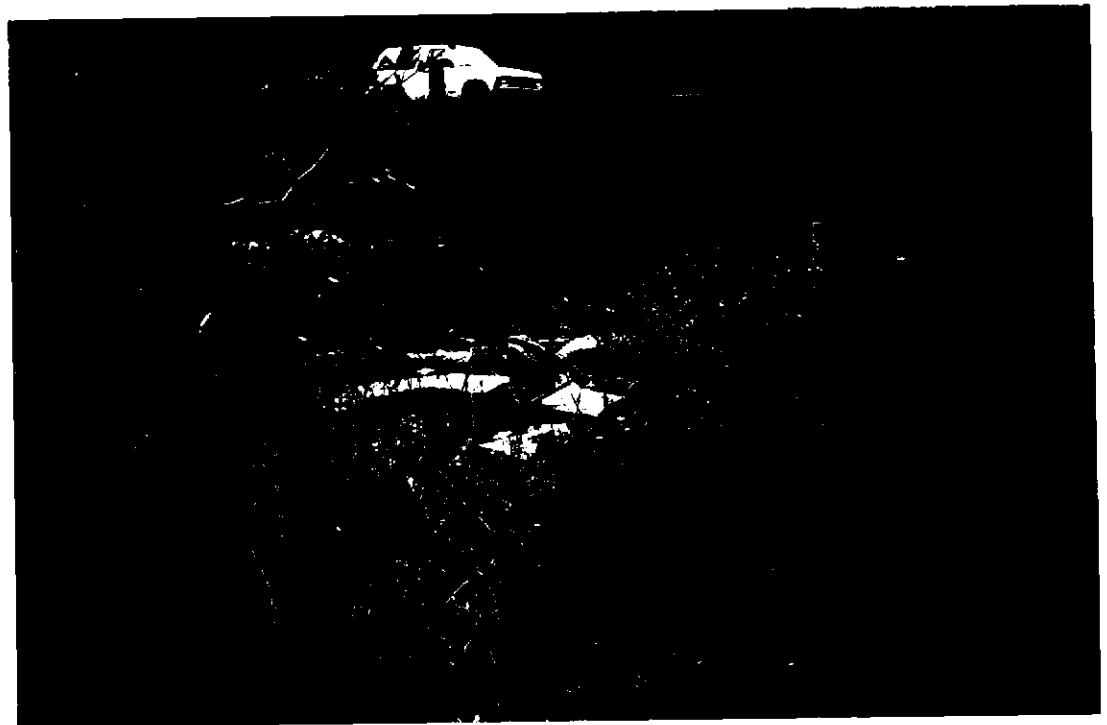
① Point of
Diversion

Looking North
upstream along
Flones Creek



② Point of
Diversion

Opening in
headwall is
2.6' x 1.9' to
open ditch.



SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer TR Pinicucci
D BUFFINGTON

Legal Description 77NR6E535NWSE

③ End of ditch
@ POU.

Ditch runs
along base of
concrete & rock
wall.

Located on
north end of
property (POU).



④ Other side
of concrete &
Rock wall. Ditch
outlet plus
numerous small
outlets for flood
irrigation.



SRBA Claim Number A63-16375

Date of Photos 10/30/2001

Photographer D. PINICUCCI
D. BUFFINGTON

Legal Description T7N R6E S35 NWSE

⑤ Place of Use
From North end
of property, looking
South.
Garage on left,
cabin in the
background (left)



⑥ Place of Use
From North end
of property.
Garage on left,
cabin in
middle of photo



RECEIVED

SEP 18 2001

WATER RESOURCES
WESTERN REGION

IN THE MATTER OF)
NOTICE OF CLAIM TO)
A WATER RIGHT NO.(S))
63-16373)
63-16375)
STATE OF IDAHO)
COUNTY OF ADA)

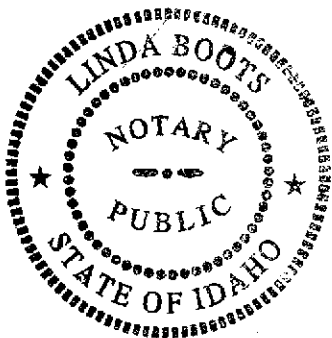
AFFIDAVIT

Thomas T. Nicholson being first duly sworn,
deposes and says:

This property is now owned by myself and my wife, Diana Nicholson. The address
and phone number is correct.

My family has owned the cabin since 1932. The land was being leased from the
Forest Service and then acquired by land patent on December 5, 1989.

My grandmother used to irrigate the land until she died at the age of 97. I have
since personally irrigated the land since then (late 60's) until the present time. I
have been irrigating the lawn, flowers and trees on the property.



Thomas T. Nicholson
(Signature)

Subscribed and sworn to before me this
day 18th of September, 2001.

Linda Boots
(Notary Public)

Residing at Meridian, ID

My Commission Expires May 31, 2007



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way, Boise, Idaho 83705-5082 - (208) 334-2190

FAX (208) 334-2348

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

August 15, 2001

CARLE NICHOLSON
PO BOX 690
MERIDIAN, ID 83680

Re: Claim No(s). 63-16373

63-16375

Dear Claimant(s):

In the past, you submitted the above referenced claim(s) in the Snake River Basin Adjudication. Enclosed is a computer generated print-out of the claim(s) for your reference only; this print-out is **NOT** to be returned or re-filed. You have indicated when this claim was filed that the water right(s) was based on either a "Statutory Claim" or "Beneficial Use" of the water. Water rights of this type are established by the historical use of water for a beneficial purpose, dating back to the time the water was first used, this date being the "**Priority Date**" as shown on the enclosed print-out. Your claim(s) has not been confirmed by a previous filing with the Department of Water Resources since there is no decree, license, or permit on file to verify the use of this water. For this reason, the Department is required to gather evidence from claimants supporting the date of priority for claims based on historical beneficial use of water. Any other claims you may have filed, that are not listed above, do not require evidence of priority be submitted at this time.

Enclosed is a pamphlet entitled "**Evidence of Priority**" which describes why evidence of the priority date is necessary along with examples of types of evidence that can be submitted to fulfill this requirement. If no evidence is submitted, or we do not hear from you within the time limit below, your priority date, as claimed, may not be recommended to the Court for decree. This could jeopardize your water use under this right(s), if water availability problems arise in the future. It is our goal to decree the historical water rights within the Snake River Basin as accurately as possible. ~~Field exams to verify~~ claims in this area are now being conducted by Department personnel. Please contact this office as soon as possible to schedule a field exam appointment convenient for you.

The required evidence supporting the priority date(s) must be submitted by **October 15, 2001**, referencing all documents with the corresponding claim number(s). If you have any questions not covered by this letter, or the enclosed pamphlet, please call the Western Region office shown above.

Adjudication Section
Department of Water Resources
Western Region Office

JS:lh
Enclosures



GEHL
VERSATILE

Mountain View Equipment Company

P.O. BOX 690 • MERIDIAN, IDAHO 83680 • TELEPHONE (208) 888-1593
TOLL FREE 1-800-769-1025 • FAX (208) 888-1824



WHITE



F A X T R A N S M I T T A L

TO: _____ DATE: 3/17/94
FROM: Tom Nicholson PAGES FOLLOWING: 10
FAX NUMBER SENT TO: 334-2348

MESSAGE: Just wanted to inform you that
the address you have for:
Thomas T. & Diana R. Nicholson
Carl V. & Patricia Nicholson
Carl E. & Blanche Nicholson
or the combination of the above
should be changed to:

P.O. Box 690
Meridian ID 83680

If you have any questions, please call me
at 888-1593

Arden Bots

MICROFILMED
JUL 25 1994

2/23/1988

SRDA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME

Nicholson

CLAIM IDENT. NO.

2007756
46316375

DATE RECEIVED

6/21/89

CK #

AMOUNT \$ 50.00

YES NO Required Info?

1. Is the name and address complete with zip code? ☒ ☐ *

2. Is a priority date entered? ☒ ☐ *

3. Is the priority date acceptable in view of mandatory filing dates? ☒ ☐ *

See Adjudication Memos #1 and #4 to determine if a permit is required.

4. (a) Is a source entered? ☒ ☐ *

5. (b) Is a tributary to entered? (if required) ☒ ☐ N/A WA *

6. Is the legal description of the p.d. sufficient? ☒ ☐ *

7. Is there a description of the diverting works? ☒ ☐ *

8. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. ☒ ☐ *

9. Is the period of use included? ☒ ☐ *

10. Is a quantity claimed for each use? ☒ ☐ *

11. Is a total quantity claimed entered? ☒ ☐ *

12. If required is a consumptive use entered? ☒ ☐ N/A *

13. Is the consumptive use correct? ☒ ☐ N/A WA *

14. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. ☒ ☐ N/A *

15. Is (are) the place(s) of use and purpose(s) indicated? ☒ ☐ *

16. Is (are) the county(ies) entered? ☒ ☐ *

17. Is the ownership of p.u. checked? ☒ ☐ *

18. Are other water rights listed or "none" indicated? ☒ ☐ *

19. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) ☒ ☐ N/A *

20. Is the basis of the claim indicated? ☒ ☐ *

21. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☒ ☐ N/A *

22. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ ☐ *

23. Has the claim been signed, sealed, and dated by a notary? ☒ ☐ *

24. Was this claim filed on time, or was an extension granted? ☒ ☐ *

25. Is the fee enclosed correct? ☒ ☐ Exempt *

26. If this claim is based on an existing water right, has the identification number been entered? ☒ ☐ N/A *

27. Should this claim be receipted and data entered? ☒ ☐ *

Claim checked by: Bruce A. Schuler

Date: 6/27/89

Claim must be returned to claimant: ☐ (Yes) ☒ (No)

Claimant must be sent a copy of amended claim for approval: ☐ (Yes) ☒ (No)

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date:

Date:

Checked by:

Date:

Comments:

RECEIVED

AUG 23 1992