

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 24-10683
Date Received: 10/17/2005
Receipt No:
Received By:

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

1. Name of Claimant(s)

IONE R WILKES Phone: (307)886-5585
PO BOX 13
AFTON WY USA 83110

BOYD W WILKES Phone: (307)886-5585
PO BOX 13
AFTON WY USA 83110

2. Date of Priority: 08/12/1966

3. Source: MILLER CREEK Trib. to: SALT RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
04S	46E	15	NW NE 1	BONNEVILLE	

5. Description of diverting works:

HEADGATE TO DITCHES FOR FLOOD IRRIGATION & STOCKWATER

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	4/01	11/01	0.94	
STOCKWATER	1/01	12/31	0.02	

7. Total Quantity Appropriated is:
0.96 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
36N	~~46E~~ 119W	28	NE	SW	3	STOCKWATER
			NW	SE		STOCKWATER
			NE	SW	3	IRRIGATION
			NW	SE		IRRIGATION
						29
						18
					Section Acres	47
					Total Acres	47

11. Place of use in counties:

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

13. Other Water Rights Used:

14. Remarks:

This right is renumbered from former right 24-2047 .

This right was renumbered to right 24-10683 .

P/U LINCOLN COUNTY, WYOMING, NESW, NWSE (LOT-3), S28, T36N, R119W, 6TH P.M.
AC.IRR. = 47

15. Basis of Claim: License

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 _____, 2005.

Notary Public

Residing at _____

My commission Expires _____