

RECEIVED

SEP 12 2006

08/18/2006

NOTICE OF ERROR
REPLY

DEPARTMENT OF
WATER RESOURCES

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: September 22, 2006

Water right number: 79-14006

MARGIE WRIGHT

~~RT 4 BOX 156~~ 145 Burnt Creek Rd.

COTTONWOOD ID 83522

Telephone Number: (208)839-2323

CONNIE ANDERSON

~~RT 4 BOX 167~~ 350 Anderson Ranch Ln.

COTTONWOOD ID 83522

Telephone Number: (208)962-3151

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

Address Change

3. Give a brief explanation as to why you disagree with these portions:

X I AGREE with this proposed recommendation: no changes need to be made.

DATE: 9-8-06

SIGNATURE: Margie Wright

Please print your name: MARGIE WRIGHT

IDWR Regional Office, 322 E Front St
PO Box 83720, Boise, ID 83720-0098, (208) 287-4800

Address changed
9-13-06

SCANNED
SEP 13 2006

RECEIVED

SEP 12 2006

08/18/2006

DEPARTMENT OF
NOTICE OF ERROR WATER RESOURCES
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: September 22, 2006

Water right number: 79-14006

MARGIE WRIGHT

~~RT 4 BOX 186~~ 145 Burnt Creek Rd

COTTONWOOD ID 83522

Telephone Number: (208)839-2323

CONNIE ANDERSON

~~RT 4 BOX 167~~ 350 Anderson Ranch Ln.

COTTONWOOD ID 83522

Telephone Number: (208)962-3151

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

Address Change

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation; no changes need to be made.

DATE: 9/08/06 SIGNATURE: Connie Anderson

Please print your name: Connie Anderson

IDWR Regional Office, 322 E Front St
PO Box 83720, Boise, ID 83720-0098, (208) 287-4800

Address changed
9-13-06

12/13/2004

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

RIGHT NUMBER: 79-14006

NAME AND ADDRESS: MARGIE WRIGHT
RT 4 BOX 186
COTTONWOOD ID 83522

CONNIE ANDERSON
RT 4 BOX 167
COTTONWOOD ID 83522

SOURCE: SCOTT CREEK TRIBUTARY: SALMON RIVER

QUANTITY: 0.020 CFS

The quantity of water under this right shall not exceed 13,000 gallons per day.

PRIORITY DATE: 01/31/1919

POINT OF DIVERSION:

T28N R01E S28 NENW End of Stream Flow Within IDAHO County
T28N R01E S29 NWSENE Begin of Stream Flow Within IDAHO County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
STOCKWATER	01/01 12/31	0.020 CFS

PLACE OF USE: STOCKWATER Within IDAHO County

T28N R01E S28	NENW	T28N R01E S28	NWNW
T28N R01E S29	NENE	T28N R01E S29	SENE

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

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

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 79-14006
Date Received: 11/19/2001
Receipt No: W028513
Received By:

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

1. Name of Claimant(s)

MARGIE WRIGHT Phone: (208)839-2323
RT 4 BOX 186
COTTONWOOD ID USA 83522

CONNIE ANDERSON Phone: (208)839-2323
RT 4 BOX 186
COTTONWOOD ID USA 83522

2. Date of Priority: 01/31/1919

3. Source: SCOTT CREEK Trib. to: SALMON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot			County	Type
28N	01E	29	NW	SE	NE	IDAHO	Beginning Point
28N	01E	28	NE	NE	NW	IDAHO	Ending Point

5. Description of diverting works:

Instream stockwater.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.02	

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

8. Total consumptive use:

9. Non-irrigation uses:
Number of other uses: 200 Range Cattle

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
28N	01E	28	NE	NW	STOCKWATER	
			NW	NW	STOCKWATER	
28N	01E	29	SE	NE	STOCKWATER	

11. Place of use in counties: IDAHO

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Beneficial Use

#9

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 A79-14006Date Received 11-19-01Receipt Number W028513

RECEIVED

NOV 19 2001

WATER RESOURCES
WESTERN REGION

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

Please type or print clearly

1. Name of Claimant (s) Margie Wright or Connie Anderson Phone (208) 839-2323Mailing Address Rt. 4 Box 186 Cottonwood, ID Zip 835222. Date of Priority (Only one (1) per claim) 1/31/19193. Source of water supply (a) Scott Creek
which is tributary to (b) Salmon River4. a. Location of existing point of diversion is: Township 2 Range _____ Section _____,
_____ 1/4 of _____ 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of _____

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township 28N Range 1E Section 29, NW 1/4 of SE 1/4 of NE 1/4,Govt. Lot _____ B.M., County of Idahoending point is: Township 28N Range 1E Section 28, NE 1/4 of NE 1/4 ofNW 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. Instream Stock

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Stockwater purposes from 1/1 to 12/31 amount 0.02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.02 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 0 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Stockwater, 200 range cattle

10. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
<u>28N</u>	<u>1E</u>	<u>28</u>					<u>S</u>	<u>S</u>											
		<u>29</u>				<u>S</u>													

Total number of acres irrigated _____

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

12. Do you own the property listed above as place of use? Yes / No _____

If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

or None (X)

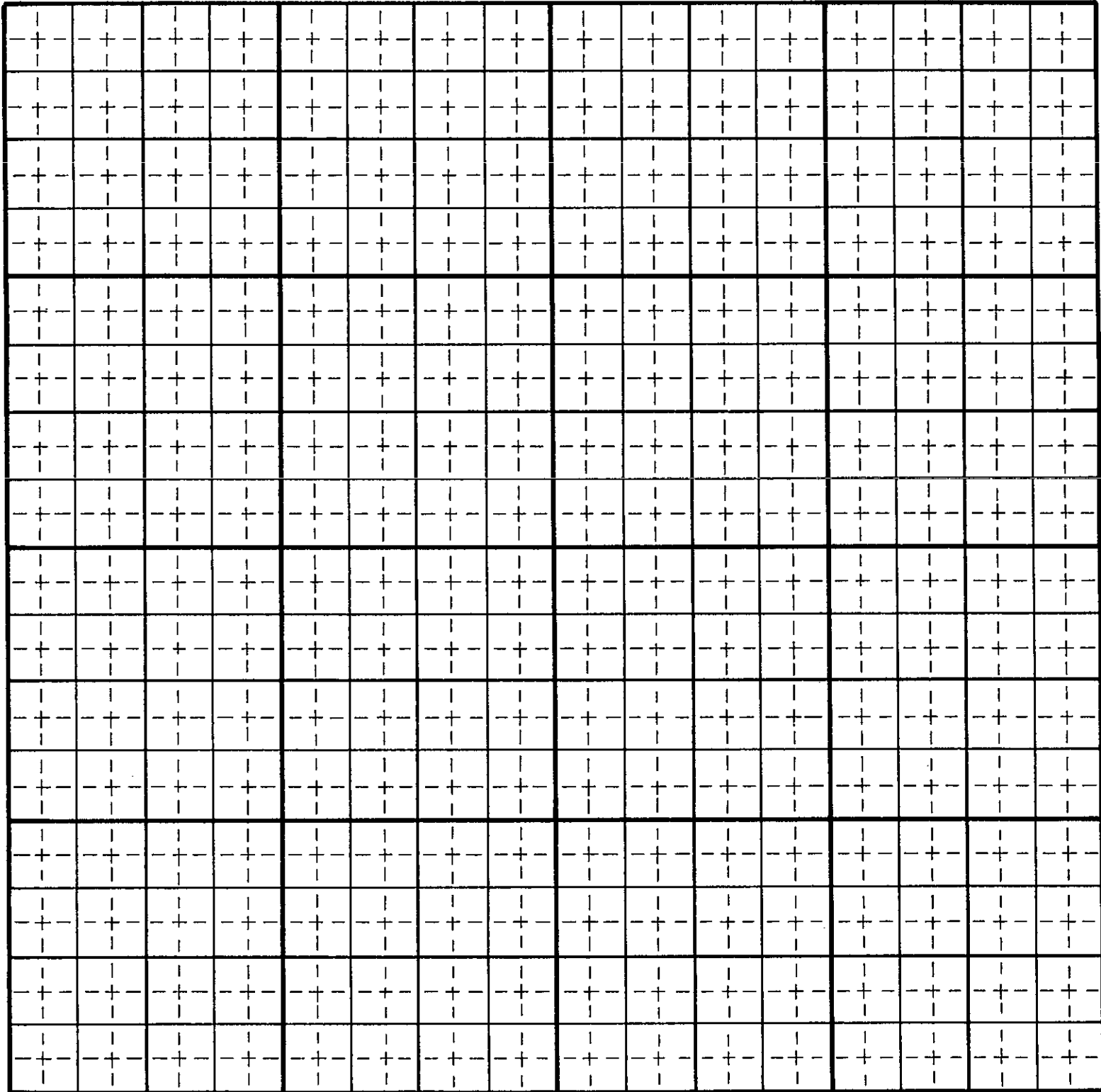
14. Remarks:

Last Name _____ Ident No. _____

Copies: White -State, Yellow-Claimant

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

Scale: 2 inches equals 1 mile



Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use ☒ 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 _____

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

Signature of Claimant (s) X Margie Wright Date 11-8-01

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

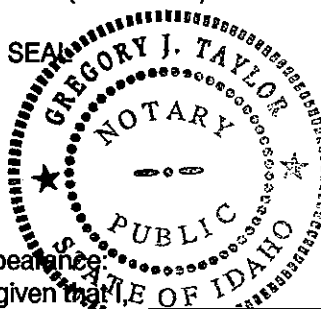
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of Nez Perce) SS.

Subscribed and sworn (or affirmed) before me this 8th day of November, 2001



Notary Public Gregory J. Taylor

Residing at Lewis ton, Idaho

My Commission Expires 4/28/2004

Please Print Name

17. Notice of Appearance

Notice is hereby given that _____ will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant