

Dept. of Water Resources
Adjudication Bureau
P. O. Box 83720
Boise, ID 83720-0098

ADDRESS SERVICE
REQUESTED

FIRST CLASS



UNITED STATES
PRIMEV BOWERS
\$00.83⁰⁰
02 1A
0004310839 NOV 18 2005
MAILED FROM ZIP CODE 83702



NO SUCH
NUMBER



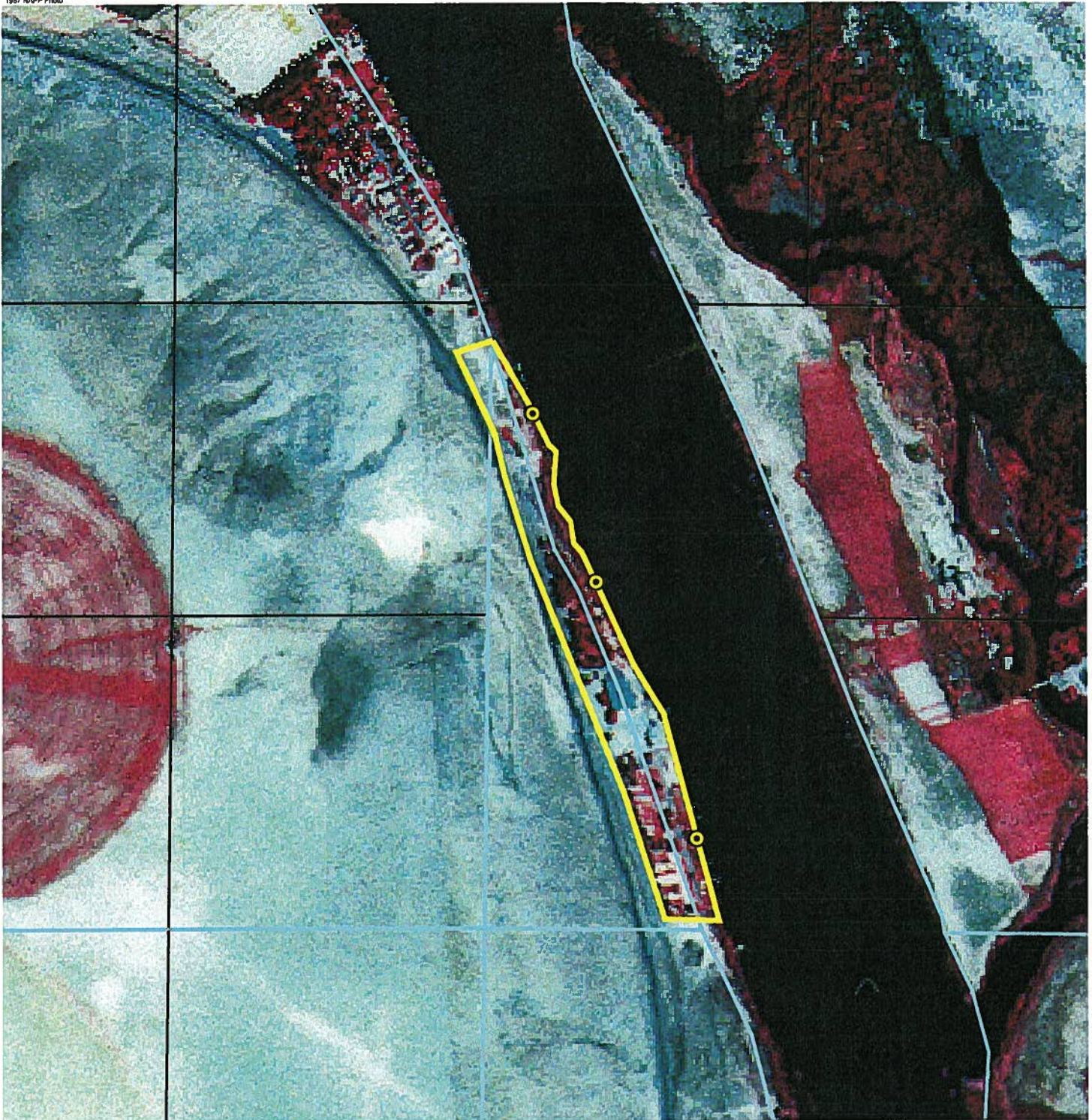
N

2-85, 2-86
Preliminary
Report

SLIGARS THOUSAND SPRINGS RESORT
C/O NORTHWEST CRANE RIGGING &
TRANSPORT CO
RT 4
TWIN FALLS ID 83301

Idaho Department of Water Resources

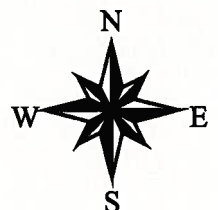
1987 NAAPP Photo



0 0.1 0.2 0.3 0.4 Miles

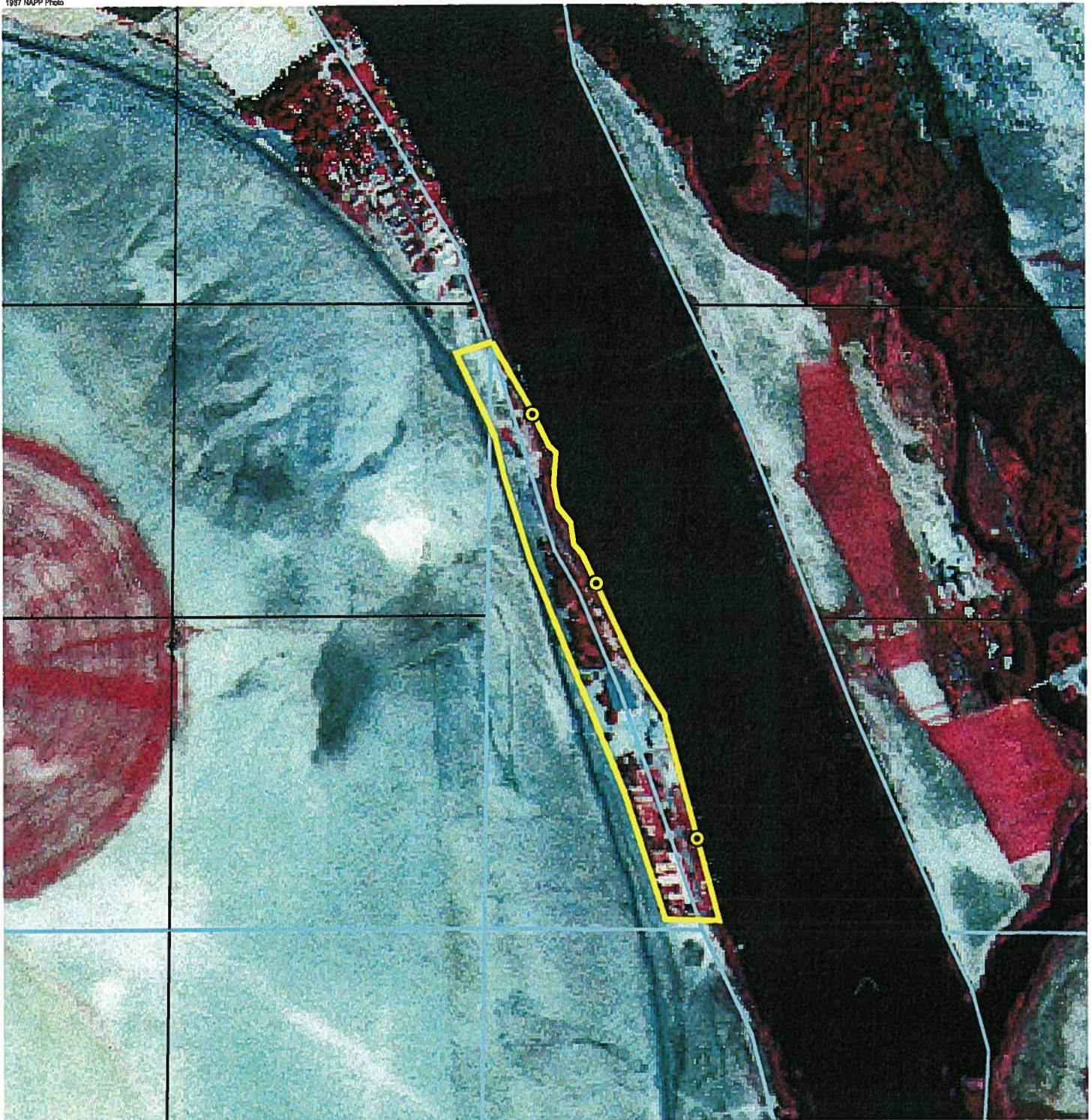
Claim Number: 02-85
Legal: T08S R14E S08
Reviewed by: MRM 10/26/05

-  Point of Diversion
-  Place of Use
-  Section Lines
-  Quarter Quarter Lines



Idaho Department of Water Resources

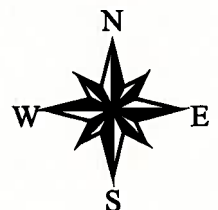
1987 NAPP Photo



0 0.1 0.2 0.3 0.4 Miles

Claim Number: 02-85
Legal: T08S R14E S08
Reviewed by: MRM 10/26/05

-  Point of Diversion
-  Place of Use
-  Section Lines
-  Quarter Quarter Lines



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: A02-00085
Date Received: 8/17/1989
Receipt No: S008877
Received By: lu

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SLIGARS THOUSAND SPRINGS RESORT 208-423-5131
Address: C/O NORTHWEST CRANE, RIGGING &
TRANSPORT CO.
RT 4
TWIN FALLS, ID 83301

2. Date of Priority: MAR 15, 1938

3. Source: SNAKE RIVER Trib. to: COLUMBIA RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
08S	14E	8	NW	SW	5		TWIN FALLS
			SW	SW	5		TWIN FALLS

5. Description of diverting works:
PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/15	11/15	0.100		

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

8. Total consumptive use is 39.0 Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
08S	14E	8	NW	SW		IRR	6.0

A02-00085

Page 1

Date: 08/17/89

MICROFILMED

MAR 19 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
08S	14E	8	SW SW		IRR	7.0
Section Acres						13.0
Total Acres						13.0

11. Place of use in counties: TWIN FALLS

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

13. Other Water Rights Used:
A47-14725, 14726 & A02-00086

14. Remarks:
THIS BENEFICIAL USE PERMIT & A02-00086 WERE ORIGINALLY HELD IN THE 02 ADJUDICATION OF THE SNAKE RIVER THAT COMMENCED 01/28/1981 FOR WATER FROM THE BASE OF MILNER DAM TO THE IDAHO-OREGON BORDER. THE ACTION WAS DISMISSED 06-12-1989 AND EXTENSION WAS GRANTED BY DAVE SHAW TO 08/14/1989.

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 Organizations:

I do solemnly swear or affirm that I am _____ of
_____, that I have signed the foregoing
_____, that I have signed the foregoing
document in the space below as _____ of
_____, and that the statements contained in the
_____ foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

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: 39576
Ident. Number A02-00085
Date Received _____
Receipt Number _____

NOTICE OF CLAIM

RECEIVED

**TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW**

AUG 14 1989
Department of Water Resources
Southern Region Office

Please type or print clearly

1. Name of Claimant (s) Sligars Thousand Springs Resort Phone (208) 423-5131

Mailing Address c/o Northwest Crane, Rigging & Transport Zip 83301
Co., Inc., Route #4, Twin Falls, ID

2. Date of Priority (Only one (1) per claim) 03-15-1938

3. Source of water supply (a) Snake River
which is tributary to (b) Columbia River

4. a. Location of existing point of diversion is: Township 8S Range 14E Section 8,
1/4 of NW 1/4 of SW 1/4, Govt. Lot, 5 B.M., County of Twin Falls

Additional points of diversion if any: NWSW Lot 5, and SWSW Lot 5

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.

6. Water is claimed for the following purposes:

(both dates are inclusive) (cfs) (acre feet)

For Irrigation purposes from 03-15 to 11-15 amount .100 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .100 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 3.9 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	
8S	14E	8										6	7						13

Total number of acres irrigated 13

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

12. Do you own the property listed above as place of use? Yes XX 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.
A47-14725, A47-14726, and A02-00086 or None ()

14. Remarks:
This beneficial use permit and A02-00086 were originally held in the 02 adjudication of the Snake River that commenced 01-28-1981 for water from the base of Milner Dam to the Idaho-Oregon border. The action was dismissed 06-12-1989 and extension was granted by Dave Shaw to 08-14-1989.

MAR 19 1993

15. Basis of Claim (check one) Beneficial Use XX Posted Notice _____ License _____ Permit _____
Decree _____
If applicable provide IDWR Water Right Number A02-00085
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 XX
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) _____ Date _____
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am President Title _____
of Northwest Crane, Rigging & Transport Co., Inc. , that I have signed the foregoing
Organization
document in the space below as President of Northwest Crane, Rigging & Transport
Title Co., Inc. Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent [Signature]
Title and Organization President, Northwest Crane, Rigging & Transport Co., Inc. Date 8-11-89

State of Idaho/or _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 11th day of August 19 89

SEAL

Notary Public Maria West

Residing at Twin Falls

My Commission Expires 4-21-93

Please Print Name

17. Notice of Appearance:

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

Signature [Signature]
Nelson, Rosholt, Robertson, Tolman & Tucker
Address P.O. Box 1906, Twin Falls, ID 83303

Date 8-11-89

Last Name Northwest Crane, Rig. Ident. Number
& Transport Co., Inc.

MICROFILMED
Copies White State, Yellow Claimant

MAR 19 1993

Date Received

State of Idaho
Department of Water Resources

JUL 12 1989

REQUEST FOR EXTENSION OF TIME
TO FILE ADJUDICATION CLAIM(S)

Department of Water Resources

The Idaho Department of Water Resources will consider this form as a request that the claimant be granted an additional period of time in which to file claim(s) beyond the 90 days allowed by Section 42-1409(10), Idaho Code.

SLIGARS THOUSAND SPRINGS RESORT
Name of Claimant

ROUTE 4
Post Office Address

TWIN FALLS ID 83301
City, State, Zip Code

TWIN FALLS
County(s) where Place of Use is located

UNKNOWN -- SEE REMARKS
Date Claim Originally Due

RECEIVE [

JUL 20 1989

Department of Water Resources
Southern Region Office

A02-00085 & A02-00086
Identify water right(s) for which extension is requested

State reason(s) why an extension of time is requested:

COURT NOTICE NOT RECEIVED TIMELY. CAN'T COMPLY WITH ORIGINAL

EXTENSION ACTION.

Claimant requests an extension to 30 days, 1989.

Lewis G. Hitchcock
Signature

LEGAL ASSISTANT -- NELSON, ROSHOLT
Title

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

The above request for extension of time is hereby

X granted denied,
and the filing deadline extended to 8/14, 1989.

Signed this 14 day of July, 1989.

DAVID B. SHAW
Director or his designated agent

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COUNTY/NAME	NUMBER	USE	CITY	DIVERSION AMOUNT (CES/DEL)	PRIORITY DATE	SOURCE
Sligar, Keith/NW Crane & Rigging	Sligar, Keith A47-13680	Dom/Stock	JER	.040	4/11/74	GROUNDWATER
	Sligar, Keith A47-13681	Dom/Stock		.040	5/21/83	GROUNDWATER
	Sligar, Keith A47-13682	Domestic		.040	8/3/71	GROUNDWATER
	Sligar, Keith A47-13683	Dom/Stock		.020	6/9/74	GROUNDWATER
	Sligar, Keith A47-13684	Dom/Stock		.020	5/19/48	GROUNDWATER
	NW Crane, Rigging A47-13685	Dom/Stock		.030	4/3/47	GROUNDWATER
	NW Crane, Rigging A47-13686	Domestic		.020	6/8/46	GROUNDWATER
	NW Crane, Rigging A47-14725	Comm/Irrig		2.000	7/28/50	GROUNDWATER
	A47-14726	Comm/Irrig		2.000	4/19/56	GROUNDWATER
	A47-14727	Indus		2.000	4/3/62	GROUNDWATER
	A47-07967			.0260	10/27/83	GROUNDWATER
	A47-001278	Irrig		1.280	5/1/1878	ROCK CREEK
	A47-00159A	Irrig		.233	3/14/1892	ROCK CREEK
	A47-04072	Comm/Heat/Rec		4.460	1/31/63	GROUNDWATER
	A47-04071	Indus		4.460	10/22/63	WASTE WATER
	A47-01568	Irrig		1.000	3/14/1872	ROCK CREEK
	A47-001338	Irrig		.120	10/30/1885	ROCK CREEK
	A47-02503A	Irrig/Dom		.560	12/17/45	GROUNDWATER
	A47-04512	Comm		.560	3/1/65	SPRING
	A47-07967	Comm				
Sligars Thousands Spring Resort						
	A02-00025	Irrig		.100	3/15/38	SNAKE RIVER
	A02-00086	Comm		.900	8/1/56	SNAKE RIVER

EXHIBIT "A"

MICROFILMED

MAR 19 1993

ROSHOLT, ROBERTSON & TUCKER

Chartered
ATTORNEYS AT LAW

JOHN A. ROSHOLT
J. EVAN ROBERTSON
JAMES C. TUCKER
GARY D. SLETTE
JERRY V. JENSEN
BRUCE M. SMITH
GARY L. QUIGLEY
JUSTIN R. SEAMONS
JOHN O. FITZGERALD
D. BERNARD ZALEHA

Twin Falls Office
142 3rd Ave. North
P.O. BOX 1906
TWIN FALLS, IDAHO 83303-1906
TELEPHONE (208) 734-0700
FAX (208) 736-0041

Boise Office
1020 MAIN STREET, SUITE 400
P.O. BOX 2139
BOISE, IDAHO 83701-2139
TELEPHONE (208) 336-0700
FAX (208) 334-6034

February 5, 1992

RECEIVED

FEB 09 1992

Department of Water Resources
Southern Region Office

Attention: Judy Givens
Southern Region
Idaho Department of Water Resources
222 Shoshone St. E.
Twin Falls, ID 83301

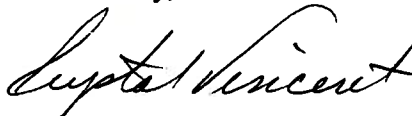
RE: SRBA CLAIMS IN THE SOUTHERN REGION

Dear Judy:

The attached is a list of our clients for whom we filed claims in the SRBA, and who by signing and returning a letter to our office, have requested that we continue to represent them in the adjudication process.

The claims highlighted identify those we filed in your region. Please check these claims and make certain that we are shown on your computer as representative, in order for us to receive the mailings from the department and perform the required service for our clients in a timely manner.

Yours truly,


Crystal Vincent

CV:mw
02059207.CV

MICROFILMED

MAR 19 1993

HH0437

ADJUDICATION PROOF READING REPORT

09/10/84

PAGE 1

WATER RIGHT NUMBER 02-0085

OWNER LAST NAME - SLIGARS THOUSAND SPRINGS RESORT FIRST NAME - ORIG OWNER -
ADDRESS LINE 1 - RT. 4 ADDRESS LINE 2 -
ADDRESS LINE 3 - CITY - TWIN FALLS
SOURCE - SNAKE RIVER TRIBUTARY OF - COLUMBIA RIVER STATE - ID ZIP CODE - 83301
SIRGE - STATUS -
TOTAL DIV. VOLUME - .00 AFR TRFR/AMEND - PRIORITY - 03-15-1938 COUNTY - TWIN FALLS TOTAL DIV. RATE - .1000-CFS
DIVERSION POINT - SWSM 08 085.14E LOT 05 REDIV - ~~50~~ WWSM 08 085.14E LOT 05 REDIV - ~~10~~ WWSM 08 085.14E LOT 05 REDIV -
FROM - 03-15 TO - 11-15 USE - IRRIGATION USE DIV. RATE - ~~585.1~~ 1000 CFS USE DIV. VOLUME - ~~1785.0~~ 00 AFR
USE - IRRIGATION PLACE OF USE - TWIN 085 RING 14E SEC 08 TRACT WWSM LOT 05 AC 06 TRACT SWSM LOT 05 AC 07
DECFEE NAME - DATE - TOTAL ACRES 13
REMARKS -
NON IRRIG USE -
OTHER RIGHTS FOR SAME USE -
PROOF DUE - PERMIT/DENIED - PROTESTED - HEARING - OLD NO. -
PROOF MADE - FLD EXAM - COND. OF APPROVAL -
DIVERSION MEANS -

~~44~~ OK

5/11/84
1/11/84

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AUG 10 1994

State of Idaho
Department of Water Resources

ADJUDICATION CLAIM ANALYSIS SHEET

Review by D. SHAFF

Date 2/16/84

Right No. 02-0085

Claimant SUIGARS

Recommendation differs from claim:
(Document any differences)

☒ Yes

☐ No

☐ Disallow

Claim Details Verified Against:

Check (X or ✓) those searched. Circle records used for recommendation.
Include copies or memos where applicable to explain findings.

☐ License

☐ Previous Statutory Claim.

☐ Permits, valid or lapsed. Number(s) if different than above _____

☐ Decree. Name & date _____

☐ Conveyance Loss Calculations. See printout included.

☐ Title abstract. ☐ In file. Or, Name & location _____

☐ County records. ☐ In file. Or, Name & location _____

☐ Affidavits. ☐ In file.

☐ Posted Notices, Water Locations Notices. ☐ In file.

☐ Deed Records. ☐ In file. Or, Name & location _____

☐ Patent Records. ☐ In file. Or, Name & location _____

☐ Metzker Maps. Identify _____

☐ A.S.C.S. Records. Year & Photograph No. _____

☐ Irrigation Company/District Records. ☐ In file. Or Name & location _____

☐ Historical Books. Name(s) & location _____

☐ Interview(s). Attach conversation memorandum.

☐ Other _____

☐ _____

Field Exam Made: ☒ Yes ☐ No Date 9/08/83

☒ Adj. Report in file ☒ Beneficial Use Report in License (S.O.) File

Measurement .10 cfs. Amount recommended .10 cfs.

Type of measuring device: PSI Method Meter No. _____

Condition _____ Date 9/08/83 Time _____

Adjudication Photo(s) Used: Name or No. THOUSAND SPRINGS

Field Photographs Taken ☐ Yes ☒ No

Memorandum in file ☐ Yes ☒ No

Remarks _____

APR 10 1984
MICROFILMED

RECEIVED

INTER-DEPARTMENT MEMO — 1

FROM D. SHAFF

NOV 4 1983

DATE 11/02/83

TO G. FUNDERBURG
J. STANTON

Department of Water Resources
Southern District Office

JAN 9 1984

SUBJECT SLIGARS RESORT: 02-0085, 02-0086

Department of Water Resources
Western Regional Office

THE LEGALS FOR THE P/D & P/U FOR THESE TWO RIGHTS
CONFLICT WITH THE CLAIMS AND THE OWNERSHIPS OBTAINED
FROM THE COUNTY. (THOSE OWNERSHIPS ARE PLACED ON
A '74 ORTHOPHOTO QUAD ENCLOSED.) PLEASE INCLUDE AN
AERIAL PHOTO, AS WITH PERMIT EXAMS, FOR 02-0085 SHOWING
P/D & IRRIGATED LANDS.

THANKS FOR YOUR HELP. THE OTHERS HAD EXCELLENT
DETAIL TO VERIFY THE EXAMS.

MICROFILMED

AUG 10 1994

[Signature]

SIGNATURE



STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
SOUTHERN REGION

John V. Evans
Governor

C. Stephen Allred
Director

1041 Blue Lakes Blvd. North
Twin Falls, Idaho 83301
(208) 734-3578

December 22, 1983

Sligar's Thousand Springs Resort
Route 4
Twin Falls, Idaho 83301

Re: Water Right 02-0085

Gentlemen:

Attached is an A.S.C.S. aerial photo of your property.

Please outline the land that is irrigated with Snake River water and return to this office. This information will provide further verification of your water right.

If you have questions concerning this matter, please feel free to contact this office.

Very truly yours,

James E. Stanton
James E. Stanton
Sr. Water Resource Agent

LOH:JES:marya

Encl:

*Area outlined as requested in Reel.
Thank you.
N. U. C.
by Alan Bradshaw*

RECEIVED
JAN 9 1984

Department of Water Resources
Western Regional Office
MICROFILMED
AUG 10 1994

R-14

POOR ORIGINAL

X PD (portable)

X PD (portable)

X PD (portable pump)

7 8 7 8
16 17

MICROFILMED

AUG 10 1994

IN THE DISTRICT COURT OF THE
OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF

JUDICIAL DISTRICT APR 28 1982

IN THE MATTER OF THE GENERAL DETER-
MINATION OF RIGHTS TO THE USE OF

Department of Water Resources
NOTICE OF CLAIM
TO A
WATER RIGHT

Department of Water Resources

02-0085
I.D. No. Map No.
\$ 65 22870
Filing No.
POOR ORIGINAL

Notice is hereby given that Sligars Thousand Springs Resort
(Name of Claimant)

Route 4 Twin Falls, Idaho 83301
(Mailing Address) (Zip Code)

Telephone No. 733-1234

claims a right to the diversion and beneficial use of the surface or ground water. The extent and nature of said claim is as follows:

- (1) Date of priority: (When was the water first applied to a beneficial use, or priority date of decreed, licensed or permit right) March 15, 1938
- (2) Describe the source of water: (Name of stream, lake, spring, etc., or ground water) Snake River tributary to Columbia River
- (3) Describe the purpose for which the water has been used and the time during the year when you have used the right claimed:
- | | | | |
|---------------------------------------|--|--|-------------------------------|
| Quantity <u>1.3</u>
(CFS, GPD, AF) | Use <u>irrigation</u>
(Domestic, irrigation, stock, etc.) | Period of Use From <u>3/15</u>
(Mo., Day) | To <u>11/15</u>
(Mo., Day) |
| | | (Both dates inclusive) | |
| Quantity _____
(CFS, GPD, AF) | Use _____
(Domestic, irrigation, stock, etc.) | Period of Use From _____
(Mo., Day) | To _____
(Mo., Day) |
| | | (Both dates inclusive) | |
| Quantity _____
(CFS, GPD, AF) | Use _____
(Domestic, irrigation, stock, etc.) | Period of Use From _____
(Mo., Day) | To _____
(Mo., Day) |
| | | (Both dates inclusive) | |
| Quantity _____
(CFS, GPD, AF) | Use _____
(Domestic, irrigation, stock, etc.) | Period of Use From _____
(Mo., Day) | To _____
(Mo., Day) |
| | | (Both dates inclusive) | |
- (4) 1.3 TOTAL QUANTITY CLAIMED. Lt 5
(CFS, GPD, AF)
- (5) A) Point of Diversion: Give location of point where water is diverted from its source SW $\frac{1}{4}$ SW $\frac{1}{4}$
Sec. 8, Twp. 8S, Rge. 14E, B.M., Twin Falls County
Additional Points: _____
B) Describe means of diversion of water: (Pump and pipeline, well, diversion dam, reservoir, length of ditch and field, etc.). Give sizes and capacities: be as specific as possible. Describe any changes in the system and give the date of the change. _____
- (6) A) Describe location of use by listing number of irrigated acres within each 40-acre tract in appropriate box. If use is not for irrigation, place an "X" in appropriate box to show location.

T	R	SEC.	NE $\frac{1}{4}$				NW $\frac{1}{4}$				SW $\frac{1}{4}$				SE $\frac{1}{4}$				TOTAL
			NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	
8S	14E	8											115						18
													18						

Total no. of acres 18

B) If water is used for other than irrigation, fully describe that use, being as specific as possible:

NOTE: Include here the type and number of stock watered: _____

(7) If you are claiming water as a member of an organization, list name of organization: _____

(8) Remarks _____

(9) Basis of claim (Check one) ☒ A) Right based on diversion and beneficial use.
☐ B) Right decreed by court, cite title of case. _____

Department of Water Resources
Western Regional Office

☐ C) Right based on application, permit, license, or previous statutory claim filed with the Idaho Department of Water Resources. Give No. _____

Be it known that the undersigned, after being duly sworn on oath, depose(s) and say(s) that all statements included herein are true and accurate to the best of (his, her, their) knowledge.

Individual

April 12, 1982
(Date)

State of Idaho

Organization

Organization

County of Twin Falls ss.

Seal

(Signature of Spouse)

(Signature of Authorized Agent)

On this 12 day of April, in the year 1982 before me
a notary public, personally appeared Keith Sliger
known to me to be the person(s) whose name(s) are subscribed to the above instrument, and acknowledged to me that (he, she, they, corporation, partnership or _____) executed the same.

My commission expires _____

Notary Public residing at _____

RECEIVED

APR 15 1982

(Signature of Claimant)

(Signature of Spouse)

THE 10 1982

(Signature of Authorized Agent)

RECEIVED

Maury A. Bull

Notary Public residing at Twin Falls, ID 83301

State of Idaho
Department of Water Resources

POOR ORIGINAL

ADJUDICATION CLAIM
REPORT OF EXAMINERS

Claim No. 02-0085

1. Name of Applicant Slipcase Thousand Spring Resort
2. Priority 3-15-1938
3. Source of Water Snake River

4. (Quantity) (Domestic, Irri., Stock Water, etc.) (Period of Use)
0.10 cfs Use irrig. From Mar 1 to Nov 1
____ cfs Use _____ From _____ to _____
____ cfs Use _____ From _____ to _____

5. Location of Point of Diversion: SW 1/4 (SE 1/4) Pt 6 of Section 7 Lot 5 Sec. 8
Twp. 8S, Rge. 14E, County of Twin Falls SE 1/4 SW 1/4
SW 1/4 SW 1/4
NW 1/4 SW 1/4 Corrected
Sec. Cov.

6. Describe Diversion Works: 2" inlet pipe, Dayton 3 hp motor, Demming
pump on portable base, 3" line to handline with 15 sprinkler heads.

7. Describe Location of Use:

TWP	RGE	SEC	NE 1/4				NW 1/4				SE 1/4				SW 1/4 SE 1/4				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
8S	14E	8				LT 5 18													18
		7																	
8S	14E	7									LT 6 5.5			.8					6
		8									1.5 6	1.5 7				LT 9 6			13

TWP. 8S RGE. 14E COUNTY TWIN FALLS SCALE: 1" = 1/4 MILE

8. Purpose other than irrigation: _____

9. Remarks: 1/8" nozzle at 28 psi according to Floyd Pilly Co. of Twin Falls
837-4987 is resort phone. Jim Smith present during exam.
15 hds x 3.05 gpm/hd = 46 gpm = 0.10 cfs

This examination was made on the 8th day of September, 19 83.

(Signed) JF. Planton
Examiner

2/16/84

