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Department of Water Resources
Adjudication Bureau

A-28

57-11512

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OFFICE OF THE
ATTORNEY GENERAL

**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

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)
)
)
)
)
STANDARD FORM 4

**MOTION TO FILE A LATE
NOTICE OF CLAIM**

INSTRUCTIONS FOR USE

This form is to be used to file a late notice of claim in a reporting area where the director's report has been filed and is made a part of *SRBA Administrative Order 1*, Section 4A (amended June 21, 1993), which may be consulted for further information.

A motion for premission to file a late notice of claim requires you to certify that it is well-grounded in fact; is warranted by existing law or a good-faith argument for the extension, modification or reversal of existing law; and is not filed for any improper purpose, such as to harass, cause unnecessary delay or needlessly increase the cost of litigation.

You may copy or reproduce this form. If you do, the text must be on the front and back of each page exactly as it appears here. Fill out the form completely and attach all fees or the court will not accept the motion for filing. The Verification and Certificate of Mailing must be completed. Check each box to verify you have followed the instructions.

- ☒ I have read the *SRBA Administrative Order 1, Rules of Procedure* (amended June 21, 1993).
- ☒ I have read *SRBA Administrative Order 10 Order Governing Procedures in the SRBA for Domestic and Stock Water Uses* (dated March 22, 1995).

My name is J. ROBERT QUINLY

My address is 6771 BEATRICE
FRUITLAND, ID 83619

My phone number is: Work _____ Home 208-452-5595

I am an attorney representing _____

My name is _____

My address is _____

My phone number is _____

The water right number I want to file a late notice of claim for is

- ☒ I did not file a notice of claim to the use of water in the SRBA because:

I THOUGHT MY WIFE HAD FILED. SHE WAS
KILLED IN AN AUTO ACCIDENT 9/93. I HAVE SINCE
DISCOVERED SHE DID NOT FILE

- ☐ I filed a notice of claim and elected to defer judicial proceedings on my domestic or stock water use. I desire to reinstate my notice of claim for domestic or stock water use.

I am providing legal and factual documentation for my claimed use of water. The documents I am providing are: (You must describe the documents and attach a readable copy.)

NOTICE OF CLAIM TO A WATER RIGHT

You do not have to fill this out if you are reinstating a notice of claim for domestic or stock water use but you **must** attach a copy of your notice of claim.

I have attached:

- ☒ A fully completed notice of claim (available from the Idaho Department of Water Resources (IDWR)).
- ☒ A claim filing fee for a domestic and stock water use. IDWR may charge this fee pursuant to I.C. §42-1414. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: *State of Idaho Department of Water Resources* in the amount of \$ _____.
- ☐ A claim filing fee and a late claim fee for those claims other than a domestic or stock water use for which a notice of claim was not filed. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: *State of Idaho Department of Water Resources* in the amount of \$ _____.
- ☒ For those claimants who did not previously file a notice of claim, a court appearance fee in the amount of \$65.00 in the form of a check made payable to: *SRBA*. Persons filing a motion for late notice of claim do not become a party or claimant in the SRBA simply by filing this motion.

Follow these instructions regarding the hearing on this motion.

1. Contact the SRBA Court (208-736-3011) to request a hearing date and time.
2. Fill in the following information:

This motion will be heard on 18 Jul '95 1:30 P.M.
(Insert Date and Time)

at the SRBA courthouse, 253 Third Avenue North, Twin Falls, Idaho.

VERIFICATION

(Must be completed)

State of IDAHO

County of LAYETTE

J. ROBERT QUINLY, being first duly sworn, upon oath, deposes and says:
(Insert name of person filing form)

That I am the person or entity filing this motion and I have read the motion, know its contents and that the statements are true to the best of my knowledge and belief.

J. Robert Quinly
Signature of person filing form

By: _____
Attorney signing in representative capacity

Subscribed and sworn to before me on 4-28-95.
(Insert Date)

Patrice A. Skirts
Notary Public for Idaho
Residing at: Weiner, Id
My Commission expires: 10-27-98

INSTRUCTIONS FOR MAILING

Mail the form, including all attachments, to the Clerk of the SRBA Court and to the parties identified in the Certificate of Mailing. **FAX filings will not be accepted by the SRBA Clerk of the Court.**

You must sign the Certificate of Mailing to show that you followed these steps.

CERTIFICATE OF MAILING

I certify that on 28 APRIL, 1995, I mailed the original and copies of this form, including all attachments, to the following persons by mailing the original and/or copies, postage prepaid and addressed as follows:

1. Original to:

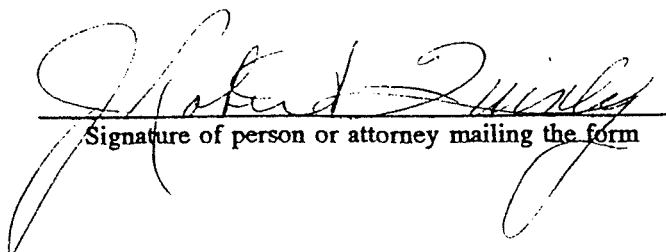
Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
P. O. Box 2707
Twin Falls, Idaho 83303-2707

2. One copy to:

Chief, Natural Resources Division
Office of the Attorney General
State of Idaho
P. O. Box 44449
Boise, Idaho 83711-4449

3. One copy to:

United States Department of Justice
Environment and Natural Resource Division
550 West Fort Street, Box 33
Boise, Idaho 83724



Signature of person or attorney mailing the form

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

Identification No. _____

Date Received _____

Receipt Number _____

**NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.**

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) L. ROBERT QUINLY Phone (208) 452-5595
Mailing Address 6771 BEATRICE RD Zip 83619
FRUITLAND, ID
2. Date of Priority (Only one per claim) 7/28/82 Month/Day/Year
3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____
Name or kind of source
which is tributary to (b) _____

4. Location of point of diversion is: Township 6S Range 4E
Section 4 ASSESSORS TAX #8
1/4 of NW 1/4 of NE 1/4, Govt. Lot 2, BM.,
County of OWYHEE
Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate 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. WELL, 6" CASING, 120 FEET DEEP 3/4 HORSE
SUBMERSIBLE PIPE TO HOUSE

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions)

For DOMESTIC purposes from 1-1 Month/Day to 12-31 Month/Day amount 104 (cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 104 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully (Domestic give number of households served if single ownership; Stockwater: Type and Number of livestock) ONE HOME

10. Place of use is: Township: 6S Range 4E
Section 4 ASSESSOR TAX #8 1/4 of 243 B.M.,

for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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

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.
X None or _____

14. Remarks: THIS PARCEL LIES IN TWO (2) LOTS, ASSESSOR ASSIGNED TAX #8 TO FACILITATE DESCRIPTION

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments _____

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

Signature of Claimant (s) Robert Quinly Date 29 Mar '95
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____

of _____, Title _____, 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 _____ Date _____

Title and Organization _____

State of Idaho/or _____)

County of PAYETTE) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 29TH day of March 1995

SEAL

Notary Public Michael E. Holladay

Residing at Payette Id

My Commission Expires 12-16-99

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant



DOROTHY H. QUINLY
J. ROBERT QUINLY
6771 BEATRICE RD. 452-5595
FRUITLAND, ID 83619

6176

92-1/1241

Pay to the
Order of

SR BA
Sixty-five and no/100 \$ *65.00*
Dollars

WESTONE
BANK

West One Bank, Idaho
Payette Office 1-0037
P.O. Box 238
Payette, ID 83661
1-800-221-5511

For

[Redacted] 61760

Check American WEST ONE MADE

J. Robert Quinly



DOROTHY H. QUINLY
J. ROBERT QUINLY
6771 BEATRICE RD. 452-5595
FRUITLAND, ID 83619

6146

92-1/1241

Pay to the
Order of

Idaho Department of Water Resources \$ *25.00*
Twenty-five and no/100 Dollars

WESTONE
BANK

West One Bank, Idaho
Payette Office 1-0037
P.O. Box 238
Payette, ID 83661
1-800-221-5511

For

[Redacted] 61460

Check American WEST ONE MADE

J. Robert Quinly