

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: 74-2351

Date Received: ____/____/2014

Received By:

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

RECEIVED
JUN 27 2014
DEPARTMENT OF
WATER RESOURCES

1. Name of Claimant(s)

SHANNA FOSTER Phone:(208)768-2609
PO BOX 212
LEADORE ID 83464
JENNIFER AYERS
87 HAWLEY CREEK RD
LEADORE ID 83464

2. Date of Priority: 1/9/1963

3. Source: EVERSON CREEK Tributary to: LEE CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County	Type
15N	24E	1	SE NE		LEMHI	

5. Description of diverting works: Dam from Everson Creek into ditch, ditch conveys water to property.

6. Water is used for the following purposes:

Purpose	From To	C.F.S.	(or) A.F.A
IRRIGATION	3/15 11/15	0.55	

7. Total Quantity Appropriated is: 0.55 C.F.S. and/or A.F.A

8. Non-irrigation uses:

9. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
15N	25E	5	SW NW		IRRIGATION	5.2
			NW SW		IRRIGATION	13.7
					Section Acres	18.9
Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
15N	25E	6	NE NE	1	IRRIGATION	3.6
			SE NE	6	IRRIGATION	4.8
					Section Acres	8.4
						Total Acres 27.3

10. Place of use in counties: LEMHI

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

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use: Water Use Description
IRRIGATION

14. Basis of Claim: Decreed

15. 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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

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

Signature of Claimant(s): C. R. [Signature] Date: 6/19/2014
Attorney for Claimant Date: _____

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

Title of _____
Organization

That I have signed the foregoing document in the space below as

Title of _____
Organization

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

Signature of Authorized Agent _____ Date: _____

Title and Organization _____

Please print name

CERTIFICATE OF MAILING

I certify that on June 25, ²⁰¹⁴~~199~~, 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
PO Box 2707
Twin Falls, ID 83303-2707

2. Copies to:

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

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

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

3. If you are filing an amended Notice of Claim in a subcase being heard before the Presiding Judge or a Special Master, you must serve a copy on all parties to that subcase.
(Insert Names/address of parties)



Signature of person or attorney mailing the form