

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: A72-10377
Date Received: 1/04/1990
Receipt No: S010839
Received By: _____

DATA ENTERED BY SCC
DATE 1-4-90

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

1. Name: SYVILLA BUXTON 208-879-4441
Address: P.O. BOX 171
CHALLIS, ID 83226
AND/OR
Name: MONA JAMES 208-879-4441
Address: P.O. BOX 171
CHALLIS, ID 83226
2. Date of Priority: JUL 31, 1964
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
14N	19E	32	NE	NE	NE		CUSTER
5. Description of diverting works:
6"X 65' WELL, 1 HP PUMP
6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		
7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) A.F.A.
8. Total consumptive use is Acre Feet Per Annum.
9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
14N	19E	32	NE NE		DOMEST	

11. Place of use in counties: CUSTER

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

13. Other Water Rights Used:
NONE

14. Remarks:

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 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 _____ 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

Identification No. A72-10377

Date Received _____

Receipt Number 5010839 *sc*

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.

RECEIVED

JAN 4 1990

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Syvilla Buxton and/or Mona James Phone (208) 879-4441

Mailing Address Box 171, CHALLIS, IDAHO Zip 83226

2. Date of Priority (Only one per claim) JULY, 1964 Month/Day/Year

3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____

which is tributary to (b) _____ Name or kind of source

4. Location of point of diversion is: Township 14N Range 19E

Section 32, _____ 1/4 of NE 1/4 of NE 1/4, Govt. Lot _____, BM.,

County of CUSTER

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. 6" CASING, 65 FEET DEEP, 1 HORSE PUMP

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

For DOMESTIC purposes from JAN 1 to DEC 31 amount .04 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .04 (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) DI,

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10. Place of use is: Township: 14N Range 19E
Section 32, NE 1/4 of NE 1/4, Govt. Lot _____, 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? CUSTER

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: _____

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

Number of Attachments 1

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 Attorney-in-fact
of Syvilla Bampton Organization Title _____, that I have signed the foregoing
document in the space below as Attorney-in-fact of Syvilla Bampton Organization Title _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Mona James Date 12/6/89

Title and Organization Attorney-in-fact

State of Idaho/or _____)

County of Custer) ss. **NOTARIZATION REQUIRED FOR EACH CLAIM**

Subscribed and sworn (or affirmed) before me this 6th day of December 19 89

SEAL

Notary Public Robert V. Skorstelf

Residing at Twin Falls, Idaho

My Commission Expires 1-16-1995

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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DURABLE GENERAL POWER OF ATTORNEY

STATE OF IDAHO)

: ss.

County of)

Know all Men by These Presents, which are intended to constitute a DURABLE GENERAL POWER OF ATTORNEY

That I SYVILLA BUXTON of Challis, Idaho

do hereby appoint MONA JAMES of Challis, Idaho

and

1st alternate of

2nd alternate of

My Attorney(s)-in-Fact TO ACT (jointly), as my true and lawful Attorney(s)-in-Fact, for me and my name, place and stead:

(A) Power with Respect to Bank Accounts. To establish accounts of all kinds for me with financial institutions of any kind; to modify, terminate, make deposits to and write checks on and endorse checks for or make withdrawals from all accounts in my name or with respect to which I am an authorized signatory; to negotiate, endorse or transfer any checks or other instruments with respect to any such accounts; and to contract for any services rendered by any financial institution.

(B) Power with respect to Safe-Deposit Boxes. To contract with any institution for the maintenance of a safe-deposit box in my name; to have access to all safe-deposit boxes in my name or with respect to which I am an authorized signatory; to add to and remove from the contents of any such safe-deposit box and to terminate any and all contracts for such boxes.

(C) Power to Sell and Buy. To sell and buy real, personal, intangible or mixed property, upon such terms and conditions as may seem appropriate; to use any credit card held in my name to make such purchases and to sign such charge slips as may be necessary to use such credit cards; and to repay from any funds belonging to me any money borrowed and to pay for any purchases made or cash advanced using credit cards issued to me.

(D) Power to Exercise Rights in Securities. To exercise all rights

ES R. BENNETTS
TORNEY AT LAW
P. O. BOX 36
CHALLIS, IDAHO 83226
(204) 879-2488

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with respect to securities that I now own, or may hereafter acquire; and to establish, utilize and terminate brokerage accounts.

(E) Power to Borrow Money (including any Insurance Policy Loans). To borrow money for my account upon such terms and conditions as may seem appropriate and to secure such borrowing by the granting of security interests in any property or interest in property which I may now or hereafter own; to borrow money upon any life insurance policies owned by me upon my life for any purpose and to grant a security interest in such policy to secure any such loans; and no insurance company shall be under any obligation whatsoever to determine the need for such loan or the application of the proceeds therefrom.

(F) Power with Respect to Taxes. To prepare, sign and file Federal, state and/or local income, gift, property or other tax returns, claims, etc.

(G) Power to Demand and Receive. To demand, arbitrate, settle, sue for, collect, receive, deposit, expand for my benefit, reinvest or make such other appropriate dispositions of, as my Agent deems appropriate, all cash rights to payments of cash, property (personal, intangible and/or mixed), rights and/or benefits to which I am now or may in the future become entitled, regardless of the identity of the individual or public or private entity involved (and for purposes of receiving Social Security benefits, my Agent is herewith appointed my "Representative Payee"); to utilize all lawful means and methods for such purposes.

I further give and grant to my said Attorney(s)-in-Fact full power and authority to do and perform every act necessary to be done in the exercise of any of the foregoing powers, or perform any legal act as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said Attorney(s)-in-Fact shall lawfully do, or cause to be done by virtue hereof.

This instrument may not be changed orally.

This power of attorney is durable and shall not be affected by the disability or incompetence of the principal.

This power shall automatically terminate on _____ (if blank, there is no automatic termination).

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

In witness whereof, I have hereunto signed my name this 16th day of August, 1988.

Signello B. Burton

Principal

FILED
MAR 19 1993

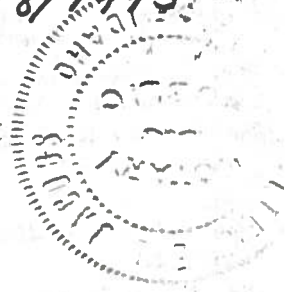
Mona James
Specimen Signature of Attorney-in-Fact

STATE OF IDAHO)
 : ss.
County of Custer)

On this 16th day of August, 1988, before me, the undersigned, a Notary Public in and for said State, personally appeared SYVILLA BUXTON, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

Walter Ed Jacob
Notary Public for Idaho
Residing at: Salmon, Idaho
My Comm. Expires: 5/8/1993



JAMES R. BENNETTS
ATTORNEY AT LAW
P.O. BOX 36
CHALLIS, IDAHO 83226
TEL. (208) 879-4488

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MAR 19 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Jan. 9, 1990

Re: A72-10377

SYLVILLA BUXTON
P O BOX 171
CHALLIS ID 83226

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

A handwritten signature in cursive script, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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WATER RIGHT NUMBER - A72-10377 PREFIX TRANSLATION: ADJUDICATION CLAIM OLD (D) NUMBER -
+ - - - - LAST NAME - - - - + + - FIRST NAME - - - - + - - - - ADDRESS - - - - - - - - +

*** C - CURRENT OWNER ***
BUXTON

SYVILLA

1 - P.O. BOX 171
2 -
3 -

CITY- CHALLIS
PHONE - 208-879-4441
1 - P.O. BOX 171
2 -
3 -

STATE- ID ZIP- 83226

JAMES

MONA

CITY- CHALLIS
PHONE - 208-879-4441

STATE- ID ZIP- 83226

+ - - - - PRIORITY DATE - - - + + - - - REGION - - - + + - - - STAGE - - - + + - - - STATUS - - - - +
07/31/1964 17 SOUTHERN J - BENEFICIAL USE

+ - - - - SOURCE - - - - - + + - +
GROUNDWATER

+ - +
TWN RNG SEC TRACT LOT RFLG COUNTY POINT OF DIVERSION - - - - - STREAM INDEX (BLANK IF NO INDEX CODE)

14N 19E 32 NE NE (37) CUSTER

+ - - - - CODE DESCRIPTION PERIOD FROM PERIOD TO WATER USE - - - - - DIVERSION RATE DIVERSION VOLUME - - - - - +
43 - DOMESTIC 01/01 12/31 0.040

+ - - - - TOTAL DIV. RATE - + + - - - TOTAL DIV. VOLUME - + + - - - TOTAL DIV. CAPACITY - + + - - - TOTAL CONSUMPTIVE USE - + + - - - KW USAGE - +
0.040

+ - - - - TWN RNG SEC TRACT LOT ACRES PLACE OF USE - - - - - DESCRIPTION COUNTY - - - - - +
14N 19E 32 NE NE 43 DOMESTIC (37) CUSTER

+ - - - - DIVERSION MEANS - 6"X 65' WELL, 1 HP PUMP

+ - - - - NON-IRRIGATION USE - D/1 HOUSE

+ - - - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - REMARKS - - - - - NO REMARKS FOUND.

+ - - - - OLD WATER RIGHT NUMBERS - - - - - NO OLD WATER RIGHT NUMBERS FOUND.

+ - - - - CONDITIONS OF APPROVAL - - - - - NO CONDITIONS OF APPROVAL FOUND.

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NOV 01 1994

