

RECEIVED

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

AUG 08 2006

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

DEPARTMENT OF
WATER RESOURCES
CIVIL CASE NUMBER: 39576

Ident. Number 24-10712
Date Received: 2/24/2006
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

BORDEN JENKINS

Phone: (435) 590-1026

PO BOX 215

FREEDOM WY USA 83120

2. Date of Priority: 06/01/1889

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

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
05S	46E	22	NE NW NE	CARIBOU	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	04/01	10/31	2.08	
STOCKWATER	01/01	12/31	0.02	

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
05S	46E	15	NW SE	IRRIGATION	40

24-10712

07/29/2014

			SW	SE	IRRIGATION	40
			NW	SE	STOCKWATER	
			SW	SE	STOCKWATER	
					Section Acres	80
05S	46E	22	NE	NE	STOCKWATER	
			NE	NE	IRRIGATION	24
					Section Acres	24
					Total Acres	104

11. Place of use in counties: CARIBOU

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

13. Other Water Rights Used:

14. Remarks:

Claim origianlly filed on 2-24-2006 but was withdrawn on 11-6-2006. Refund of \$154 issued on 11/21/2006 under receipt B000003. Per conversation with me on 7-22-14, the claimant plans to refile claim. No late fee will be charged. Claim set to Temp status until approved by SRBA court (csaxton 7-22-14)

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

Number of attachments: 0

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): Borden Jenkins Date: _____
 _____ Date: _____