

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: A72-00185

Date Received:

Receipt No: X777777 ~~7~~

Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SPLIT RIGHT
Address:

NA, ID 00

2. Date of Priority: APR 01, 1887

3. Source: SALMON RIVER Trib. to: SNAKE RIVER
SPLIT RIGHT

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County
65N	46E	36			SUBSCRIPTION

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION			40.000		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
13N	19E	1	NW	NW	4	IRR
		2	NE	NE	1	IRR
			NW	NE	2	IRR

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Date: 11/29/89

MICROFILMED
MAR 19 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
14N	19E	35	NE	NE		IRR	
			NW	NE	1	IRR	
			SW	NE		IRR	
			SE	NE		IRR	
			NE	SW	6	IRR	
			NW	SW	6	IRR	
			NE	SE		IRR	
			NW	SE		IRR	
			SW	SE		IRR	
		36	SE	SE		IRR	
			NE	NW		IRR	
			NW	NW		IRR	
			SW	NW		IRR	
			SE	NW		IRR	
			NE	SW		IRR	
			NW	SW		IRR	
			SW	SW		IRR	
			SE	SW		IRR	

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:

14. Remarks:

LESS 10.29 AC. FROM LOT 2, SEC. 2.

THIS RIGHT HAS BEEN SPLIT.

G. CHIVERS CLAIMS 25% OF THE ENTIRE DECREED RIGHT ON A72-00185A FOR 10CFS ON 103 ACRES.

15. Basis of Claim:

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 _____