

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: A72-02048A
Date Received: 12/14/1989
Receipt No: X777777
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: COMBINED RIGHT
Address:

X, ID X

2. Date of Priority: OCT 13, 1916

3. Source: UNNAMED STREAM Trib. to: SALMON RIVER, EAST FORK
COMBINED RIGHT

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
09N	17E	1	SE	NW			CUSTER

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	11/01	0.800		120.00

7. Total Quantity Appropriated is:
0.800 C.F.S. (and/or) 120.00 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
09N	17E	1	NE	NE	1	IRR	15.0
			NW	NE	2	IRR	15.0
			SW	NE		IRR	10.0

Section Acres 40.0

A72-02048A

Page 1

Date: 12/14/89

72-2048

MICROFILMED

MAR 19 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
09N	18E	6	NW	NW	4	IRR	5.0
Section Acres							5.0
Total Acres							45.0

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:

COMBINED WITH #72-02048B.
A72-02048, BAKER, .12 CFS

15. Basis of Claim:

Water Right Number: 12598

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

Ident. Number: A72-02048B
Date Received: 12/14/1989
Receipt No: X777777
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: COMBINED RIGHT
Address: _____

X, ID

X

2. Date of Priority: OCT 13, 1916

3. Source: SALMON RIVER, EAST FORK Trib. to: SALMON RIVER
COMBINED RIGHT

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
09N	17E	1	NE	SW			CUSTER

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	11/01	0.400		60.00

7. Total Quantity Appropriated is:
0.400 C.F.S. (and/or) 60.00 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
09N	17E	1	NE	NE	1	IRR	5.0
			NW	NE	2	IRR	5.0
			SW	NE		IRR	5.0

Section Acres 15.0

A72-02048B

Page 1

Date: 12/14/89

MICROFILMED

MAR 19 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
09N	18E	6	NW NW	4	IRR	5.0
Section Acres						5.0
Total Acres						20.0

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:

COMBINED WITH #72-02048A.
A72-02048, .12 CFS, BAKER.

15. Basis of Claim:

Water Right Number: 12598

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 _____