

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: A72-02147
Date Received: 11/16/1989
Receipt No: X777777
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CLYDE A. GREEN SPLIT RIGHT
Address:

CHALLIS, ID 83226

Name: ETHEL B. PHILPS

Address: X, ID 00000

2. Date of Priority: JUL 18, 1946

3. Source: CHALLIS CREEK LAKE Trib. to: CHALLIS CREEK
SPLIT RIGHT

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
14N	17E	18	SE	SW			CUSTER

5. Description of diverting works:
HEADGATE, HIGHLINE DITCH

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION STORAGE	01/01	12/31			189.00
IRRIGATION FROM STORAGE	04/01	11/01			189.00

7. Total Quantity Appropriated is:
C.F.S. (and/or) 189.00 A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

A72-02147

Page

1

Date: 11/16/89

72-2147A

MICROFILMED

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
14N	19E	8	SE	SE		IRR S	2.0
			Section Acres				2.0
		17	NE	NE		IRR S	40.0
			SE	NE		IRR S	40.0
			NE	SE		IRR S	40.0
			SW	SE		IRR S	2.0
			SE	SE		IRR S	40.0
			Section Acres				162.0
		20	NE	NE		IRR S	30.0
			SE	NE		IRR S	15.0
			Section Acres				45.0
			Total Acres				209.0

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:
NONE

14. Remarks:

THIS IS A SPLIT RIGHT. THIS CLAIM IS FOR REFERENCE ONLY.
A72-02147A (FOR 2/3 OF THE RIGHT) 126.0 AC-FT. R.H. GREEN

15. Basis of Claim:

Water Right Number: R762

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 _____