

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

Claim ID: 67-15313

Date Received: _____

Receipt No: _____

Claim Fee: _____ By: _____

RECEIVED

OCT 24 2018

DEPARTMENT OF
WATER RESOURCES

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

Please type or print clearly

- Name of claimant(s) Eckhardt Family LLLP Phone (208) 549-1754
Mailing address 1275 Jenkins Creek Rd, Weiser, ID Zip 83672-5158
Street or Box City State
Email address (optional) ncherry@fmtcblue.com
- Date of priority: (Only one per claim) 4-20-1927 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water () or Other (✓) (a) Unnamed Stream
which is tributary to (b) Monroe Creek
- Location of point of diversion is: Township 12N, Range 5W, Section 6,
NE 1/4 of SE 1/4, or Govt. Lot _____ BM, County of Washington;
Parcel no. Beginning Point
Additional points of diversion, if any: Lt 4 (NWNW) Sec 5 Twp 12N Rge 5W Ending Point
If available, GPS coordinates: _____
- Description of diverting works (wells, pumps, spring boxes, pipelines, 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.
Instream stock water use
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Stockwater purposes from 1/1 Month/Day to 12/31 Month/Day amount 0.07 cfs (✓) or AFY ()
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.02 cfs (✓) or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
260 Range Cattle

9. Location of place of use is: Township 12N, Range 5W, Section 6,
NE 1/4 of SE 1/4, Govt. Lot _____ BM, Parcel no. Beginning Point
If different than shown in Item 4
for (check one) **Domestic** () **Stock** (✓) **Domestic and Stock** ()

Additional places of use, if any Lt 4 (NWNW) Sec 5 Twp 12N Rge 5W Ending Point

10. In which county(ies) are lands listed above as place of use located? Washington

11. Do you own the property listed above as place of use? Yes (✓) No ()
If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
_____ or None (✓)

13. Remarks (include an explanation of the priority date selected):
Patent date _____

14. Basis of claim (check one) **Beneficial Use** (✓) **Posted Notice** () **License** () **Permit** () **Decree** ()
Court _____ Decree Date _____ Plaintiff v. Defendant _____
If applicable provide IDWR Water Right Number _____

15. **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: 1

For Individuals: I/We do solemnly swear or affirm under penalty of perjury 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 under penalty of perjury that I am, and that I have signed the
foregoing document in the space below as the
Registered Agent _____ of Eckhardt Family LLLP,
Agent's title (Please print) Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent James L Eckhardt Date 10-19-18
Printed Name of Authorized Agent James L Eckhardt

16. **Notice of Appearance:**
Notice is hereby given that i, (please print) Norman M Semanko, will be acting
as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by
the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____
Address _____

Name of claimant, Eckhardt Family LLLP Claim ID 67-15313

Prepared for Eckhardt Family LLLP by ERO 10-2018