

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: A37-07602

Date Received: 6/24/1988

Receipt No: S000529

Received By: *[Signature]*

**COPY FOR
YOUR FILES**

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

**COPY FOR
YOUR FILES**

1. Name: LOUIS L HUBSMITH 208-544-7581
Address: 647 E 130 S
DIETRICH ID 83324

AND/OR

Name: IRIS B HUBSMITH 208-544-7581
Address: 647 E 130 S
DIETRICH ID 83324

2. Date of Priority: MAY 4, 1977

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06S	19E	30	NW	NE			LINCOLN

5. Description of diverting works:
18" X 290' WELL, 400 HP MOTOR, HANDLINES

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	03/15	11/15	0.700		

7. Total Quantity Appropriated is:
0.700 C.F.S. (and/or) 105.00 A.F.A.

8. Total consumptive use is 105.0 Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06S	19E	30	NW	NW	2	IRR	35.0

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
					Section Acres	35.0
					Total Acres	35.0

11. Place of use in counties: LINCOLN

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

13. Other Water Rights Used:
NONE

14. Remarks:

WELL DEVELOPED UNDER LIC. 37-7454.

9/20/99, CHANGED OWNERSHIP AS PER FORM 1409 AND CERTIFICATES OF
DEATH AND MARRIAGE REC'D 7/22/99. C.T.

15. Basis of Claim: LICENSE



State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037

SOUTHERN REGION

November 29, 1999

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

LOUIS L & IRIS B HUBSMITH
647 E 130 S
DIETRICH ID 83324

RE: OWNERSHIP CHANGE, FOR ADJUDICATION CLAIM A37-07454, 07602

Claimant(s):

Pursuant to the change in ownership request that has been submitted to the department, we have changed the record of current ownership of the above referenced claim(s) to you. Please find the enclosed copies of the computer record of the claims, noting the change in claimant. Review these records and if there is an error, or if you have any questions, please contact this office.

Sincerely,

Cheryl E. Timm
SRBA Records Clerk

Enclosure

CT:ct

COPY SENT to Allocations 9/21/99

ACCP 10261, 10262

RECEIVED

JUL 22 1999

Department of Water Resources
Southern Region

STATE OF IDAHO

IDAHO DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

1. Water Right No(s): 37-07268, 08679
Adjudication Claim No(s): A37-07454, 07602, 10261, 10262
2. The following **REQUIRED** information must be submitted with this form:
 - A. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water rights or claims in question, **WITH ATTACHED LEGAL DESCRIPTION.**
AND
 - B. **PLAT OF PROPERTY** or **SURVEY MAP** showing the location of the place of use of the water right(s) or claim(s). (These are usually attached to your deed or on file with the county.)
OR
 - C. If your water right or adjudication claim is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.
3. Name and Address of Former Owner/Claimant Louis L. & Darlene I. Hubsmith (Deceased)
4. New Owner/Claimant(s) Louis L. & Iris B. Hubsmith
Name Connector (Check one): ☐ and, ☐ or, ☐ and/or
New Mailing Address 647 E 130 S
City, State and ZIP Code Dietrich, ID 83324
New Telephone Number () 544-7581
5. Date you acquired the property wife died Oct. 9, 1988, remarried April 8, 1989
6. Did you acquire all of the former owner's property? If you did, skip this item and go to item 7. If you acquired only a portion of the former owner's property, IDWR may need to split the water right(s) or adjudication claim(s). Describe in detail your portion of each water right or adjudication claim in the spaces in the box below only if the water right(s) or claim(s) need to be split between owners. If necessary, attach additional pages. If a water right or adjudication claim is being split and you are not sure how to identify your portion of the original right or claim, please contact the nearest IDWR office for assistance.

Number of acres you irrigate with this water right _____	Number and type of stock _____
Diversion rate in CFS _____	Number of homes you acquired _____ Other uses _____

7. Signature of New Owner(s) or Claimant(s) Louis L. Hubsmith

Corporations or other organizations must submit a list of directors and/or officers demonstrating authority to sign form.

8. For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims.

O/C 9/20/99 CT
125

State of Idaho CERTIFICATE OF DEATH

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR, WITH THIS DEPT. OF HEALTH & WELFARE RAISED SEAL, SHALL BE USED AS PRIMA FACIE EVIDENCE OF THIS DEATH UNDER IDAHO CODE 39-2411 & 39-274

State File No. _____
Local Reg. No. 052

DECEDENT		DECEDENT — NAME — FIRST <u>DARLENE</u> MIDDLE <u>IDA</u> LAST <u>HUBSMITH</u>			SEX <u>Female</u>		DATE OF DEATH (Mo., Day, Yr.) <u>Oct. 9, 1988</u>			
RACE — (White, Black, American Indian, Japanese, etc.) <u>White</u>		AGE — Last Birthday (Yrs.) <u>54</u>		UNDER 1 YEAR MO. <u>7</u> DAYS <u>25</u>		UNDER 1 DAY HOURS <u>1</u> MIN. <u></u>		DATE OF BIRTH (Mo., Day, Yr.) <u>February 14, 1934</u>		
COUNTY OF DEATH <u>Blaine</u>		CITY, TOWN OR LOCATION OF DEATH <u>Hailey</u>								
STATE OF BIRTH (If not in U.S., name country) <u>Idaho</u>		CITIZEN OF WHAT COUNTRY <u>USA</u>		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) <u>Married</u>		SURVIVING SPOUSE (If wife, give maiden name) <u>Leon Hubsmith</u>		IF HOSP. OR INST. Indicate DOA, OP, Emer. Rm., Inpatient (Specify) <u>Inpatient</u>		
SOCIAL SECURITY NUMBER <u>528-44-9114</u>		USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) <u>Housewife</u>				KIND OF BUSINESS OR INDUSTRY <u>Home</u>				
RESIDENCE STATE <u>Idaho</u> COUNTY <u>Lincoln</u>		CITY, TOWN OR LOCATION <u>Dietrich</u>		STREET AND NUMBER <u>---</u>		INSIDE CITY LIMITS (Yes or No) <u>NO</u>				
PARENTS		FATHER — NAME <u>Vernon F. Perron</u>			BIRTHPLACE <u>Idaho</u>		MOTHER — MAIDEN NAME <u>Hazel Johnson</u>		BIRTHPLACE <u>Idaho</u>	
INFORMANT — NAME <u>Leon Hubsmith</u>		MAILING ADDRESS <u>Dietrich, Idaho 83324</u>			STREET OR R.F.D. NO. <u>---</u>		CITY OR TOWN <u>---</u>		STATE <u>---</u> ZIP <u>---</u>	
DISPOSITION		BURIAL, OUT-OF-STATE REMOVAL, CREMATION, ENTOMBMENT, OTHER (Specify) <u>Burial</u>			DATE <u>10-12-1988</u>		CEMETERY OR CREMATORY — NAME <u>Shoshone Cemetery</u>		LOCATION CITY OR TOWN <u>Shoshone, Idaho</u> STATE <u>---</u>	
MORTICIAN (Signature) <u>Francis Bergin</u>		LICENSE NO. <u>M-463</u>		NAME OF FACILITY <u>Bergin Funeral Chapel</u>		ADDRESS OF FACILITY <u>Shoshone, Idaho 83352</u>		CITY OR TOWN <u>---</u> STATE <u>---</u> ZIP <u>---</u>		
CERTIFIER		21a. I hereby certify that I attended the deceased from <u>10/9/88</u> to <u>10/9/88</u> . I last saw the deceased alive on <u>10/9/88</u> . To the best of my knowledge, death occurred at the time, date and place mentioned in this certificate stated. (Signature and Title) <u>Donald Levin, M.D.</u> DATE SIGNED (Mo., Day, Yr.) <u>10/27/88</u> HOUR OF DEATH <u>22:20</u>				22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated: (Coroner's Signature) _____ DATE SIGNED (Mo., Day, Yr.) _____ HOUR OF DEATH _____ 22b. PRONOUNCED DEAD (Mo., Day, Yr.) _____ PRONOUNCED DEAD (Hour) _____ 22c. ON _____ AT _____				
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR CORONER) (Type or Print) <u>Donald Levin, M.D., 21 East Maple, Hailey, Idaho 83330</u>		REGISTRAR		24a. (Signature) <u>Betty J. Nelson</u>		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) <u>October 31, 1988</u>				
CAUSE OF DEATH		25. PART I Enter Only One Cause Per Line For (a), (b), (c) IMMEDIATE CAUSE (a) <u>respiratory arrest</u> DUE TO, OR AS A CONSEQUENCE OF: (b) <u>overwhelming sepsis</u> DUE TO, OR AS A CONSEQUENCE OF: (c) <u>bone marrow suppression w/ chemotherapy</u> PART II OTHER SIGNIFICANT CONDITIONS — Conditions contributing to death but not related to cause given in PART I (a) <u>stomach cancer</u> AUTOPSY (Yes or No) <u>NO</u>								
TO BE USED FOR EXTERNAL CAUSES ONLY		ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) _____		DATE OF INJURY (Mo., Day, Yr.) _____		HOUR OF INJURY _____		DESCRIBE HOW INJURY OCCURRED _____		
INJURY AT WORK (Yes or No) _____		IF TRANSPORTATION ACCIDENT, Specify ☐ Driver ☐ Passenger ☐ Pedestrian		PLACE OF INJURY — At home, farm, street, factory, office building, etc. (Specify) _____		LOCATION STREET OR R.F.D. NO., CITY/TOWN OR COUNTY _____		STATE _____		

HHW-0128
revised 7-88

*At a minimum complete items 1, 2, 7a, b, c, d.

(STATE OF IDAHO)
(County of Twin Falls)

THIS IS TO CERTIFY that this is a true copy of a death certificate filed with the Idaho Department of Health and Welfare under Title 39, Idaho Code. The local Deputy State Registrar in the South Central District Health Department issued this copy with local registration number affixed under authority granted to the State Registrar (IDAPA 16.02.8150.02b). Copies of this certificate made at a later date may reflect legal amendments made subsequent to this issuance.

NOT VALID WITHOUT RAISED SEAL OF IDAHO STATE DEPARTMENT OF HEALTH AND WELFARE

October 31, 1988
Date Issued

Clair L. Beeson
State Registrar of Vital Statistics

Attn: Jim Stanion

Thanks again
Leon

MARRIAGE LICENSE No 46702

County of Salt Lake

The State of Utah
To Any Person Legally Authorized to Solemnize Marriage, Greeting:

You are hereby Authorized to join in Holy Matrimony

DISTRICT

Mr. LOUIS LEON HUBSMITH, of _____

in the County of LINCOLN and State of IDAHO over the age of 56 years, and

M. IRIS BEATRIX EHRMAN, of _____, of UTAH over the age of 39 years.

in the County of SALT LAKE and State of _____ 21st day of APRIL 1989

I hereby certify that on the 28th day of APRIL in the

County of SALT LAKE County Clerk, Salt Lake County, Utah

By Walter A. Smith Deputy Clerk.

STATE OF UTAH
County of CACHE }

I, the undersigned, a _____ of the County of _____

according to law _____ of the County of _____

State of IDAHO and _____ of the County of _____

SALT LAKE State of UTAH The nature of the ceremony was according to _____

the Church of Jesus Christ of latter-day Saints and was a present mutual agreement of marriage between the parties

for all time.

SIGNATURE OF PARTIES INVOLVED IN MARRIAGE

Groom: Leon Hubsmith Last Name

Bride: Iris Beatrix Ehrsman Last Name

1st Name: Leon 2nd Name: Hubsmith

1st Name: Iris 2nd Name: Ehrsman

1st Name: Arthur R. Hubsmith 2nd Name: Hubsmith

1st Name: Arthur R. Hubsmith 2nd Name: Hubsmith

1st Name: Arthur R. Hubsmith 2nd Name: Hubsmith

Signature of Person Performing Marriage
Elder of the Church of Jesus Christ of latter-day Saints
Title Position Held

Signature of Person Performing Marriage
Elder of the Church of Jesus Christ of latter-day Saints
Title Position Held

We give our permission for release of
information on application and license

TO PARTIES PERFORMING MARRIAGES: It is the duty of the person celebrating
marriage to fill out and sign the license and the bottom portion of the applica
both are to be returned to the office of County Clerk within 30 days. Anyone fe

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: A37-07602
Date Received: 6/24/1988
Receipt No: 5000529
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: LOUIS L. HUBSMITH 208-544-7581
Address: P. O. BOX 397
DIETRICH, ID 83324

AND/OR

Name: DARLENE I. HUBSMITH
Address: DIETRICH, ID 83324

2. Date of Priority: MAY 04, 1977

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06S	19E	30	NW	NE			LINCOLN

5. Description of diverting works:
18" X 290' WELL, 400 HP MOTOR, HANDLINES

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	03/15	11/15	0.700		

7. Total Quantity Appropriated is:
0.700 C.F.S. (and/or) 105.00 A.F.A.

8. Total consumptive use is 105.0 Acre Feet Per Annum.

9. Non-irrigation uses:

A37-07602

Page 1

Date: 06/24/88

MICROFILMED

FEB 24 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
06S	19E	30	NW NW	2	IRR	35.0
Section Acres						35.0
Total Acres						35.0

11. Place of use in counties: LINCOLN

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

13. Other Water Rights Used:
NONE

14. Remarks:
WELL DEVELOPED UNDER LIC. 37-7454.

15. Basis of Claim: LICENSE
Water Right Number:

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: 1

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): *John S. Hulse* Date: 24 June 88

Date: _____

State of Idaho)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 24th day
of June 19 88

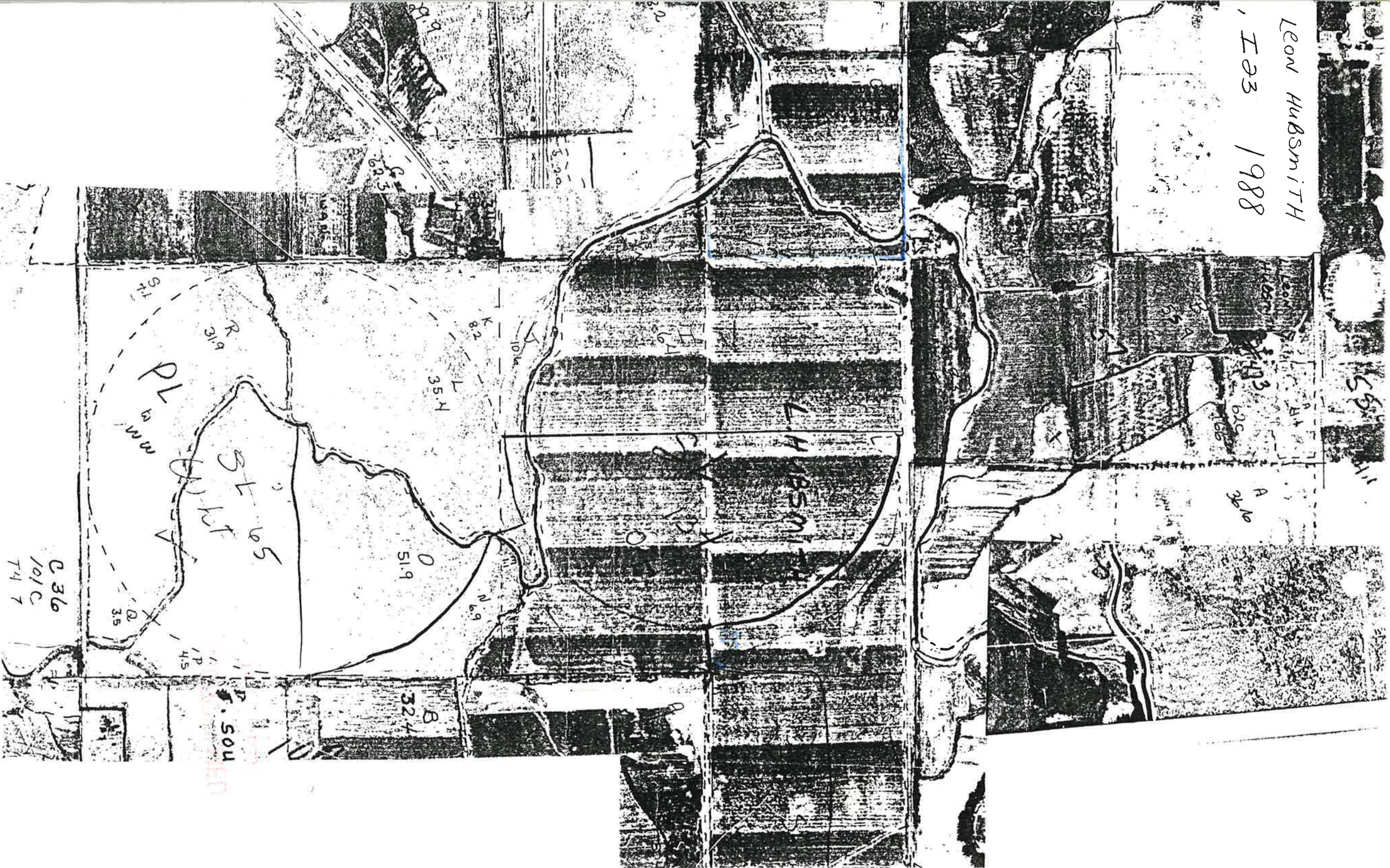
Mary D. Baldwin
Notary Public

Seal

Residing at *Gooding Id*
My Commission Expires 10/16/1992

MICROFILMED
FEB 24 1993

Leon HuBsmITH
, I 33 1988



C 36
101C
747

504

Water Right Report 37-7602

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	THE ALTON & PAULA HUYSER TRUST UNDER TRUST AGREEMENT DTD 4-1-2001 ALTON L HUYSER TTEE PAULA J HUYSER TTEE 72 N HWY 75 SHOSHONE, ID 83352 (208) 886-2777
Previous Owner	IRIS B HUBSMITH 647 E 130 S DIETRICH, ID 83342 (208)544-7581
Previous Owner	LOUIS L HUBSMITH 647 E 130 S DIETRICH, ID 83324 (208)544-7581
Original Owner	DARLENE I HUBSMITH PO BOX 397 DIETRICH, ID 83324
Attorney	HOFSTETTER LAW OFFICE, LLC 608 WEST FRANKLIN STREET BOISE, ID 83702 (208)424-7800

Status: Active

Tributary

GROUND WATER

<u>Beneficial Use</u>	<u>From</u> <u>To</u>	<u>Diversion Rate</u>	<u>Annual Volume</u>
IRRIGATION	03/15 to 11/15	2.620 CFS	524.00 AF
	<u>Total Diversion:</u>	2.620 CFS	524.00 AF

GROUND WATER SE1/4NW1/4NE1/4 Sec. 30, Twp 06S, Rge 19E, B.M.
LINCOLN County

IRRIGATION

Twp	Rge	Sec	<u>NE</u>				<u>NW</u>				<u>SW</u>				<u>SE</u>				<u>Totals</u>
			<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	
06S	19E	19									30.0 L 7		35.0 L 11	36.0 L 12					101.0
06S	19E	30			6.0				11.0 L 6	7.0						6.0			30.0

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 37-7602

Total Acres: 131

Conditions of Approval:

1. 902 Modifications to or variance from this license shall be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law. This right may be forfeited by five years of non-use.
2. X31 This right when combined with Right No. 37-7268 and 37-7454 shall not exceed 6.2 cfs.
3. 904 The right to the use of water hereby confirmed is restricted and appurtenant to the lands or place of use herein described, as provided by the laws of Idaho.

Remarks:Comments:

1. croberts 8/31/2005 POD
Comment: Correlated PODID 561455 from SpatialDataID 341083 to SpatialDataID 168591
2. jpeppers 12/4/2006 Order Correcting License
Comment: License corrected by order dated Dec. 1, 2006.
3. jpeppers 12/4/2006 POU
Comment: Updated Shape

Dates and Other Information:

Licensed Date: 12/1/2006
 Decreed Date:
 Enlargement Use Priority Date:
 Enlargement Statute Priority Date:
 State or Federal: S
 Owner Name Connector:
 Water District Number:
 Generic Max Rate Per Acre:
 Generic Max Volume Per Acre:
 Decree Defendant:
 Decree Plaintiff:
 Civil Case Number:
 Judicial District:
 Swan Falls Trust or Nontrust:
 Swan Falls Dismissed:
 DLE Act Number:
 Carey Act Number:
 Mitigation Plan: False

Combined Use Limits:

<u>Rate</u>	<u>Volume</u>	<u>Acres</u>
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6.2

Combined Water Rights: 37-7268 , 37-7454 , 37-7602

<u>Rate</u>	<u>Volume</u>	<u>Acres</u>
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6.28

Combined Water Rights: 37-8679 , 37-7268 , 37-7454 , 37-7602

Element Reviewed/Verified Dates:

<u>Element</u>	<u>Last Reviewed Date</u>	<u>Reviewer</u>	<u>Last Verified Date</u>	<u>Verifier</u>	<u>Status</u>
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IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 37-7602

Priority Date	11/28/2001 1:10:02 PM	scllellan	Closed
POD	11/28/2001 1:10:58 PM	scllellan	Closed
Source	11/28/2001 1:12:08 PM	scllellan	Closed
POU	11/28/2001 1:12:37 PM	scllellan	Closed
Use	11/28/2001 1:15:59 PM	scllellan	Closed
Season	11/28/2001 1:16:37 PM	scllellan	Closed
Quantity	11/28/2001 1:18:09 PM	scllellan	Closed
Summary	11/28/2001	scllellan	Closed

Verification Log:

<u>Element</u>	<u>Date Time Stamp</u>	<u>Reviewer</u>	<u>Log text</u>
Priority Date	11/28/2001 1:10:03 PM	scllellan	(No) 1. Should this water use have been included in a later court decree of the water rights from this source? (Yes) 4. Is the basis of claim decree or license? (Yes) 5. Does the decree or license have a Priority Date? (Yes) 6. Did the Claimant claim the decreed or licensed Priority Date ? (Yes) 15. Is the basis of claim coded correctly? (No) 16. Is a Priority Date remark and/or condition required?
POD	11/28/2001 1:10:58 PM	scllellan	(Yes) 1. Is the basis of this claim a Decree or License? (Yes) 4. Does the parent right have a POD? (Yes) 5. Can the claimed POD be verified using the water right file? (Yes) 10. Is a POD remark and/or condition required?
POD	11/28/2001 1:11:30 PM	scllellan	Edited point location
Source	11/28/2001 1:12:09 PM	scllellan	(Yes) 1. Is the basis of claim decree or license? (Yes) 4. Does the parent right have a source? (Yes) 5. Can the claimed source be verified using the water right file? (No) 11. Is a Source remark and/or condition required?
POU	11/28/2001 1:12:37 PM	scllellan	(Yes) 1. Is the basis of this claim a Decree or License? (Yes) 2a. Is the POU required? (Yes) 5. Does the parent right have a POU? (Yes) 6. Can the claimed POU be verified using the water right file? (No) 14. Is a POU remark and/or condition required?
POU	11/28/2001 1:15:02 PM	scllellan	Edited shape boundary

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 37-7602

Use	11/28/2001 1:15:59 PM	sclellan	(Yes) 1. Is the basis of this claim a Decree or License? (Yes) 4. Does the parent right have a Purpose of Use? (Yes) 5. Can the claimed Purpose of Use be verified using the water right file? (No) 13. Is a Purpose of Use remark and/or condition required?
Season	11/28/2001 1:16:37 PM	sclellan	(Yes) 1. Is the basis of claim decree or license? (Yes) 4. Does the parent right have a Period of Use? (Yes) 5. Can the claimed Period of Use be verified using the water right file? (Yes) 14. Is irrigation claimed as a Purpose of Use? (No) 16. Is the Period of Use on the decree, license or transfer shorter on either the start date or end date than allowable under current IDWR standards? (No) 18. Is a Period of Use remark and/or condition required?
POD	11/28/2001 1:18:09 PM	sclellan	(Yes) 1. Is the basis of this claim a Decree or License? (Yes) 4. Does the parent right have a diversion rate and/or volume? (Yes) 5. Can the claimed diversion rate and/or volume be verified using the water right file? (Yes) 8. Does the parent right have an annual diversion volume limit? (Yes) 10. Is a irrigation a purpose of use? (No) 12. Is a Quantity remark or condition required?
Summary	11/28/2001 1:22:08 PM	sclellan	(Yes) 1. Is the basis of this claim a Decree, License, Permit, Application or Posted Notice? (No) 2. Does any evidence indicate a five year period of continuous nonuse occurred that could result in recommending forfeiture or partial forfeiture? (Yes) 5. Is an additional remark and/or condition required? (Yes) 6. Would you like to view the recommended right? (No) 7. Is this a split or combined right? (No) 8. Do you have documents you would like to attach or link to the file? (Yes) 9. Would you like to set the verification date?
Contacts	11/28/2001 1:09:11 PM	sclellan	(No) 1. Do you want to schedule an appointment?

Comment for 1: DESKTOP REVIEW.

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 37-7602

SubCase:

SubCase Number: 37-7602

Class: 1

SF5 Filed Date:

Special Master Recom Signed Date:

Attorney Assigned:

Adjudication Agent: Steve Clelland

Basis of Claim:

Date Filed: 10/11/2002 Objection Status: Active

Water Supply Bank:

06/22/2002

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: July 23, 2002

Water right number: 37-7602

IRIS B HUBSMITH
647 E 130 S
DIETRICH ID 83324
Telephone Number: (208)544-7581

LOUIS L HUBSMITH
647 E 130 S
DIETRICH ID 83324
Telephone Number: (208)544-7581

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 7-26-02

SIGNATURE:

Please print your name:

Louis L. Hubsmith

IDWR State Office, PO Box 83720, Boise ID 83707-9815

03/15/2002

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 37-7602

NAME AND ADDRESS: IRIS B HUBSMITH
647 E 130 S
DIETRICH ID 83324

LOUIS L HUBSMITH
647 E 130 S
DIETRICH ID 83324

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.70 CFS
140.0 AFY

USE OF THIS RIGHT WITH RIGHT NO. 37-7454 IS LIMITED TO A TOTAL COMBINED
DIVERSION RATE OF 5.09 CFS.

PRIORITY DATE: 05/04/1977

POINT OF DIVERSION:

T06S R19E S30 SENWNE Within LINCOLN County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE
IRRIGATION

PERIOD OF USE
03/15 11/15

QUANTITY
0.700 CFS
140.00 AFY

PLACE OF USE:

IRRIGATION Within LINCOLN County

T06S R19E S30 Lot 2 NWNW 35.0

35 ACRES TOTAL

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

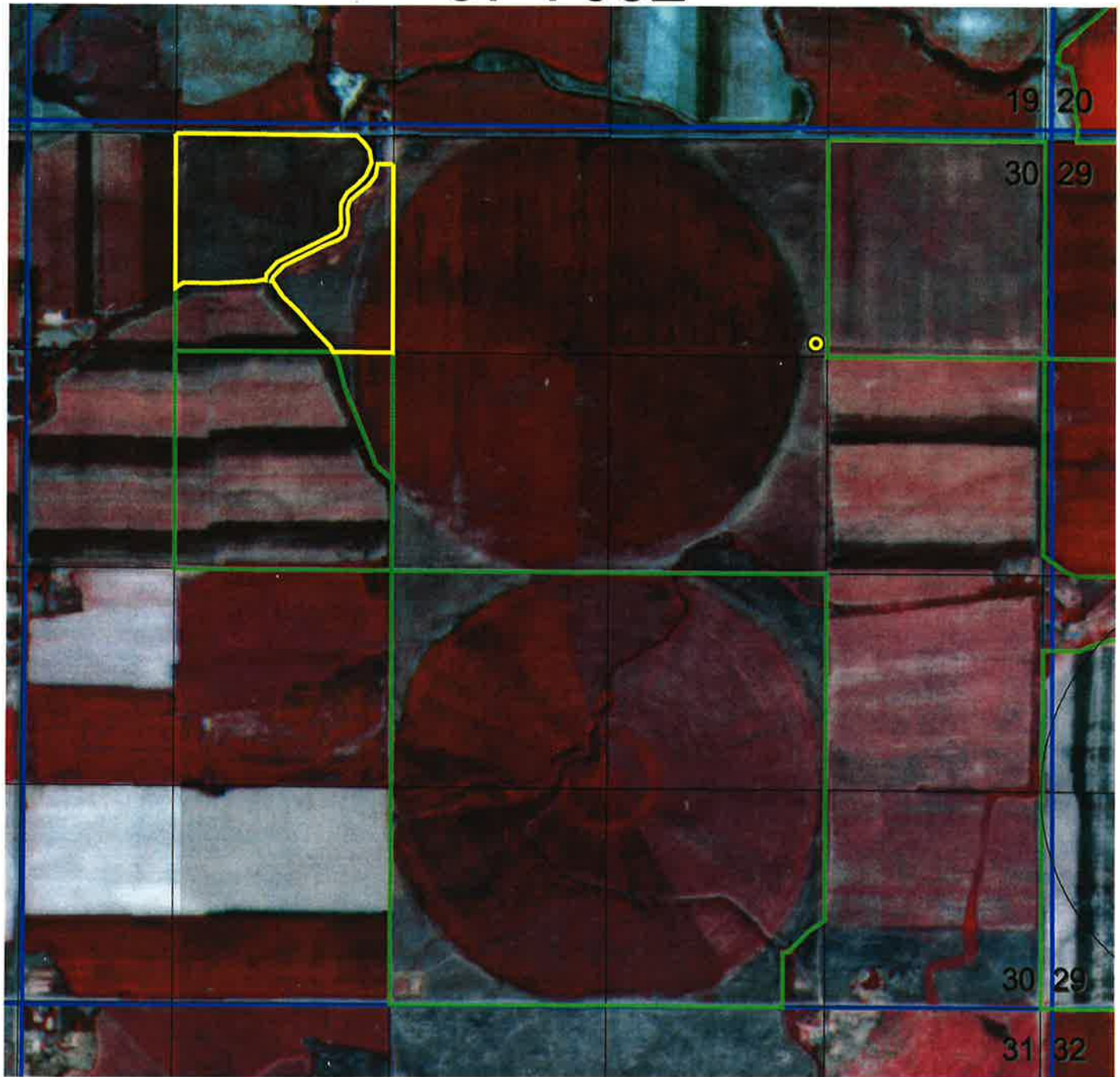
THIS PARTIAL DECREE IS SUBJECT TO SUCH GENERAL PROVISIONS
NECESSARY FOR THE DEFINITION OF THE RIGHTS OR FOR THE EFFICIENT
ADMINISTRATION OF THE WATER RIGHTS AS MAY BE ULTIMATELY
DETERMINED BY THE COURT AT A POINT IN TIME NO LATER THAN THE
ENTRY OF A FINAL UNIFIED DECREE. SECTION 42-1412(6), IDAHO CODE.

EXPLANATORY MATERIAL: License

RIGHT NO. 37-7454 IS ALSO DIVERTED THROUGH POINT OF DIVERSION
DESCRIBED ABOVE.

IDAHO DEPT OF WATER RESOURCES

37-7602



1320 0 1320 Feet

-  Basin 37 part 1-POU
-  Basin 37 part 1-POD
-  Ownership FED-Private
-  Streams
-  Section Lines
-  Quarter - Quarter lines

TWN: 6S
RNG: 19E
SEC: 30 (NWNW) LOT 2

GIS Place of Use Presentation
NAPP Aerial Photo 1987/1988
By Steve Clelland

Date: November 28, 2001

