

02/02/2004

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

RIGHT NUMBER: 23-12

NAME AND ADDRESS: WADE R FLEMING
4319 N 55 E
IDAHO FALLS ID 83401

SOURCE: PALISADES CREEK

TRIBUTARY: SNAKE RIVER

QUANTITY: 3.200 CFS

PRIORITY DATE: 05/20/1889

POINT OF DIVERSION:

T01N R44E S26 SWSWSE Within BONNEVILLE County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
IRRIGATION	04/15 10/31	3.200 CFS

PLACE OF USE: IRRIGATION Within BONNEVILLE County

T01N R44E S21	SESE	40.0	T01N R44E S22	SWSW	40.0
T01N R44E S22	SESW	33.0	T01N R44E S27	NWNE	0.1
T01N R44E S27	NENW	33.0	T01N R44E S27	NWNW	37.0
T01N R44E S28 Lot 1	NENE	37.0	T01N R44E S28 Lot 4	SENE	6.9

227 ACRES TOTAL

USE OF THIS RIGHT WITH RIGHT NO. 23-00013A IS LIMITED TO THE IRRIGATION OF A COMBINED TOTAL OF 227.0 ACRES IN A SINGLE IRRIGATION SEASON.

THIS RIGHT IS LIMITED TO THE IRRIGATION OF 160.0 ACRES WITHIN THE PLACE OF USE DESCRIBED ABOVE IN A SINGLE IRRIGATION SEASON.

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: Decreed

USE OF THIS RIGHT IS COMBINED WITH WATER FROM THE PALISADES IRRIGATION COMPANY.

WATER IS DELIVERED THROUGH THE PALISADES IRRIGATION COMPANY CANAL.

RIGHT NO. 23-00013A IS ALSO DIVERTED THROUGH POINT OF DIVERSION DESCRIBED ABOVE.



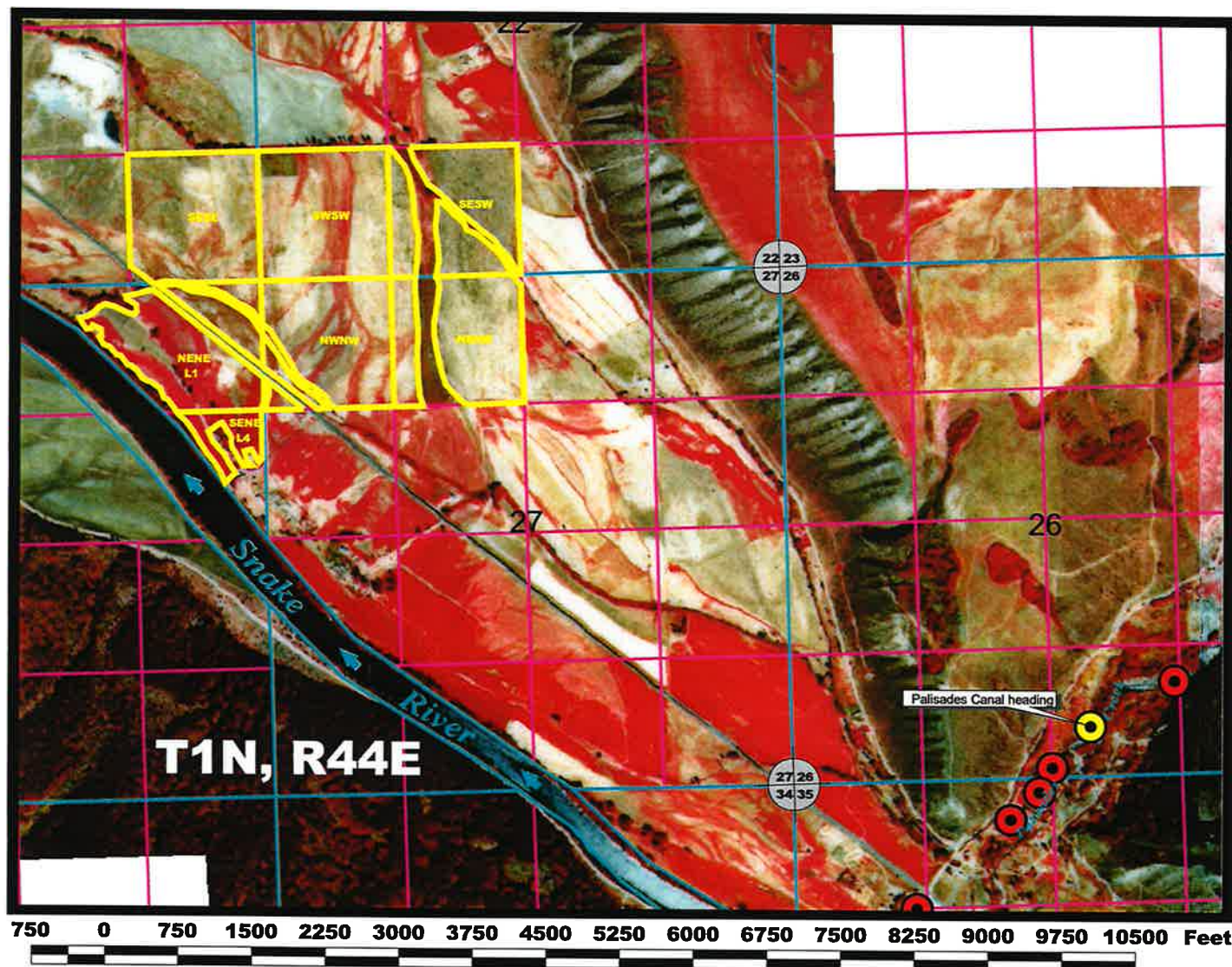
JUL 02 2004

SCANNED

State of Idaho

Department of Water Resources

Eastern Region



Water Right(s):

23-00012, 23-00013A

Place of Use: (parts of)

**T1N, R44E Sec. 21 SESE,
Sec. 22 S2SW, Sec. 27 N2NW,
Sec. 28 NENE (L1), SENE (L4),**

Point(s) of Diversion:

T1N, R44E Sec. 26 SWSWSE

**Note: Delivery through The
Palisades Irrigation Co. canal**

LEGEND

-  **Point of Diversion**
-  **SESE** **Place of Use**
-  **Section**
-  **Quarter-Quarter**



GIS Place of Use Illustration
1987/1988 NAPP Photography
Prepared by: A. Ruberry
Date: February 2004

Contacts Data Entry Form

Water Right No. 23-00012

Owner Type	Full Name	Address	City	State	Zip	Phone
------------	-----------	---------	------	-------	-----	-------

Current Owner WADE FLEMING

Name connector: and _____, or _____, and/or _____

Current Owner _____

Current Owner _____

Representing Attorney: _____ Phone Number: _____

Accompanied By: _____ Phone Number: _____

Relationship to Claimant: _____

Date of Field Exam: _____ Time: _____

Directions to Property (if different from above) and/or update owner information:

DECREED UNDER ROXBURG PATENT vs TUSTON PATENT, 1910,
AS #66, TO J.N. BARRUS, AT 160" OF PALISADES CR, 5/20/1889.

Q: APPARENTLY CARRIED BY PALISADES CANAL.

FB INDICATED: POU, POD, System/DELIVERY

OVERLAPS w/ 01-00115P, 01-00035V, 23-00013(A)

(23-00013 entered et.
prior to numbering)

Reviewer: _____

Date: _____

SCANNED
JUL 02 2004

Priority Date Data Entry Form

Claim Number: _____

Water Right Priority Date: _____ Water Right Basis: _____

Claimed Priority Date: May 20, 1889 Claimed Basis: DECREERecommended Priority Date: 5/20/1889 Recommended Basis: DECREE☐ Use Claimed Priority Date and Basis as Recommended Priority Date and Basis

Document the evidence submitted/reviewed for the priority date claimed, include your analysis of the evidence:

Priority matches DECREE.

Reviewer: _____

Date: _____

Point of Diversion and Source Data Entry Form

Claim Number: _____

Water Right Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary: _____

Claimed Point of Diversion: T 1N, R 44E, Sec. 26, SW, SW, SE, County: BONN.Source: PALISADOES CK Tributary: SNAKE RIVER, SORR

Recommended Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary: _____

☒ Use Claimed POD and Source as Recommended POD and Source

Twp	Rge	Sec	Gov Lot	QQQ of QQ of Q	County	Source
<u>1N</u>	<u>44E</u>	<u>26</u>		<u>SW SW SE</u>	<u>BONN</u>	<u>PALISADOES CK</u>
GPS Coordinates: _____						
GPS Coordinates: _____						
GPS Coordinates: _____						
GPS Coordinates: _____						
GPS Coordinates: _____						
GPS Coordinates: _____						
GPS Coordinates: _____						

TRIBUTARY
SNAKE RIVER SORR

Other rights from this POD? GPS POD = A0009534 ON HANDWRITTEN PICTURES

Document how the POD and Source were verified and/or Pump and Motor data:

Rt. CARRIED BY PALISADOES FIRM CO. CANAL - AND, COND
HAS SHARES IN THE CANAL CO. 1/500 SAME PLACE

Transfers Changing POD _____

Reviewer: _____

Date: _____

RIVER PUMP GPS TAG # A0012427 = PALISADOES SPONGE PUMP
AND 01-115P, 01-35V, ONLY

Place Of Use Data Entry Form

Claim Number: _____

_____ Use Claimed POU as Recommended POU

Claimed Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
1N	44E	22			BONN		80 ^e	Farig
		27			"		65 ^e	"
		28			"		71 ^e	"
		21			"		40 ^e	"
Total Acres							256 ^e	

Recommended Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
Total Acres							227 by GBS	

Document how the POU was verified:

OVERLAP OF OTHER RIGHTS. w/ Limits on EACH.Commoned ACREAGE limits applyRemark

Transfers Changing POU _____

Reviewer: _____

Date: _____

Period of Use and Quantity Data Entry Form

Claim Number: _____

☐ Use Claimed Period of Use and Quantity as Recommended Period of Use and Quantity

Water Right Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Claimed Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
PR219	4/1	11/1	3.2	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
PR219	4/15	10/31	3.2	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate 3.2

Overall Diversion Volume _____

Document how the Period of Use and/or Diversion Rate were verified:

SOU NOT ADDRESSED BY DECREE. USG DEPT. STD. OF 4/15
TO 10/31 FOR THIS AREA

Q NOT REDUCED - ALLOWANCE FOR CONVEY LOSS — No Combined Q Limits
NRCS DOC CONFIRM NECESSITY FOR ADDITIONAL Q/AC

Reviewer: _____

Date: _____

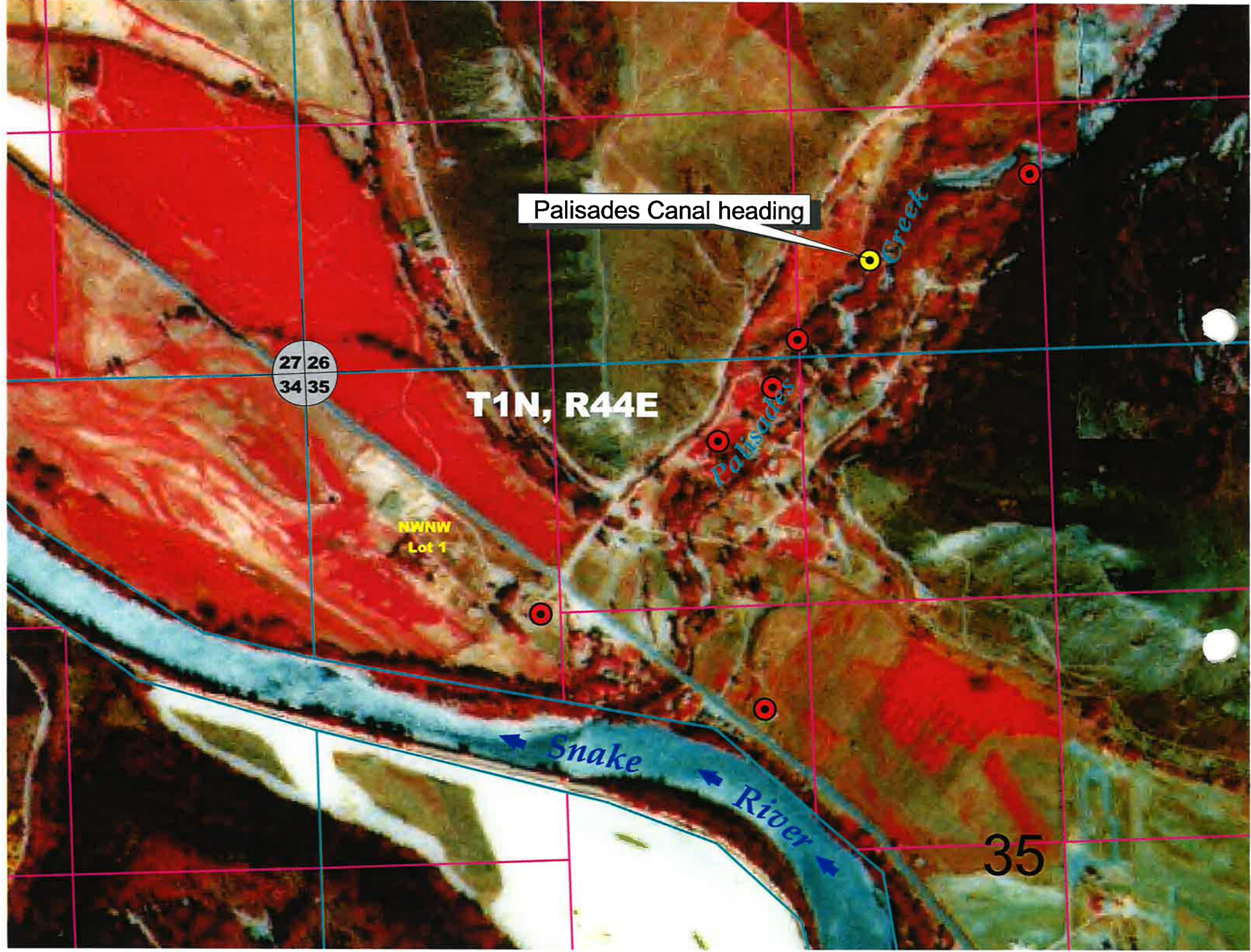
CONVEYANCE LOSS ALLOWANCE: 6 Q's @ 5%/Q = 30% is part of Div Rates
MAX. Div. Rate (both priorities) is 6.4 cfs - 30% to FIELD HEADGATE = 4.48 cfs
LEAVES 4.48 cfs SERVICEABLE AT FIELD HEADGATE.

Log for claim 23-00012

Spatial Dynamics CAT

1/8/01

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
01n44e	21	SESE	40	40	
01n44e	22	SWSW	40	40	
01n44e	22	SESW	40	40	
01n44e	27	NENW	36	40	
01n44e	27	NWNW	29	40	Indiscernible
01n44e	28	NENE	52	51	Includes NWNE qq.
01n44e	28	SENE	19	15	
Totals:			256	266	



Palisades Canal heading

27 26
34 35

T1N, R44E

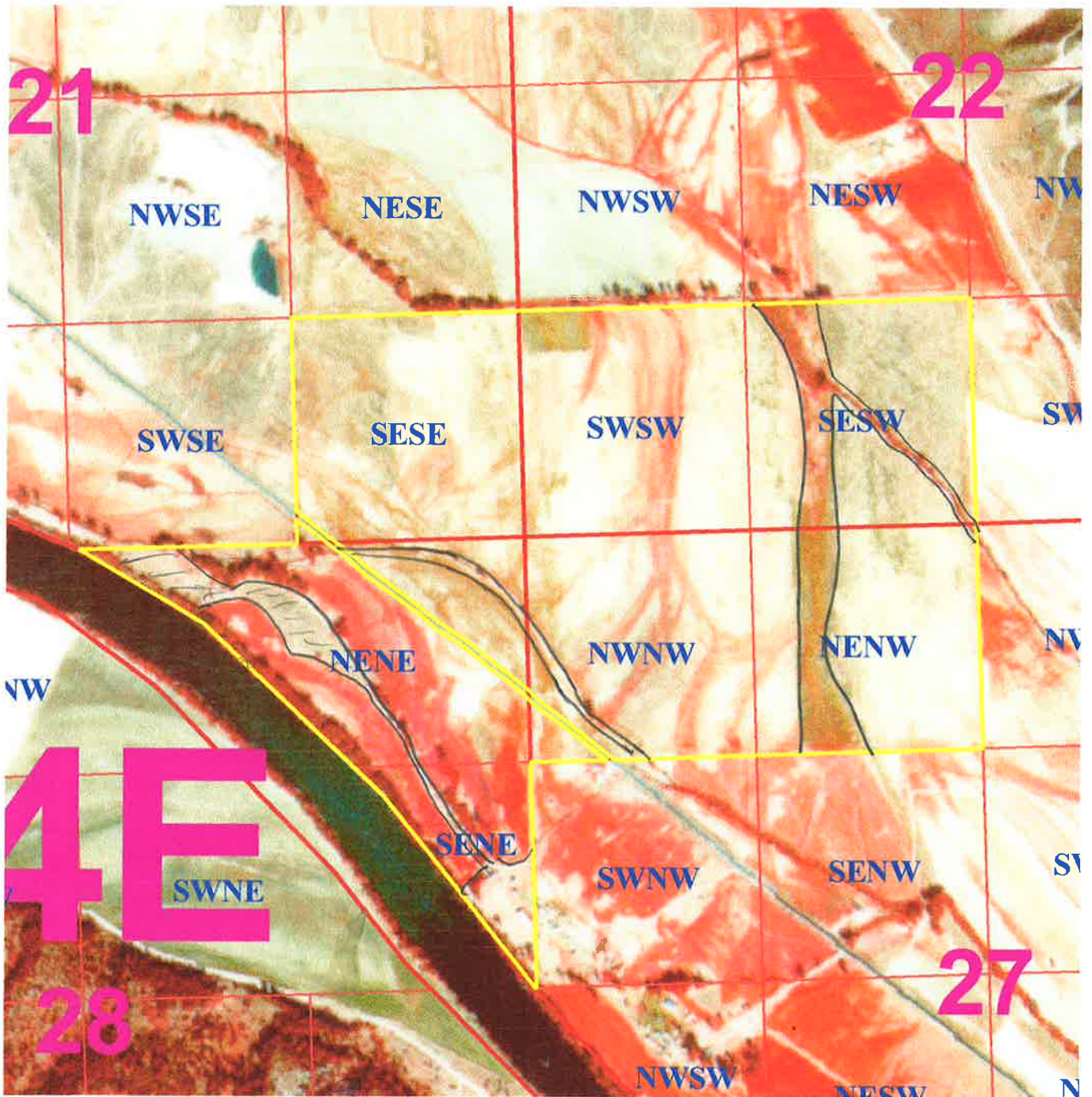
NWNW
Lot 1

Snake
River

35

Water Right Claim Number 23-00012
Townships , 5N38E, 1N44E

01/08/2001



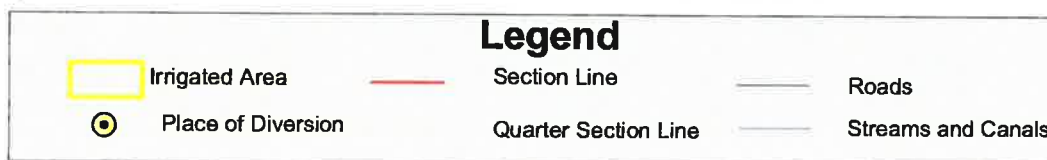
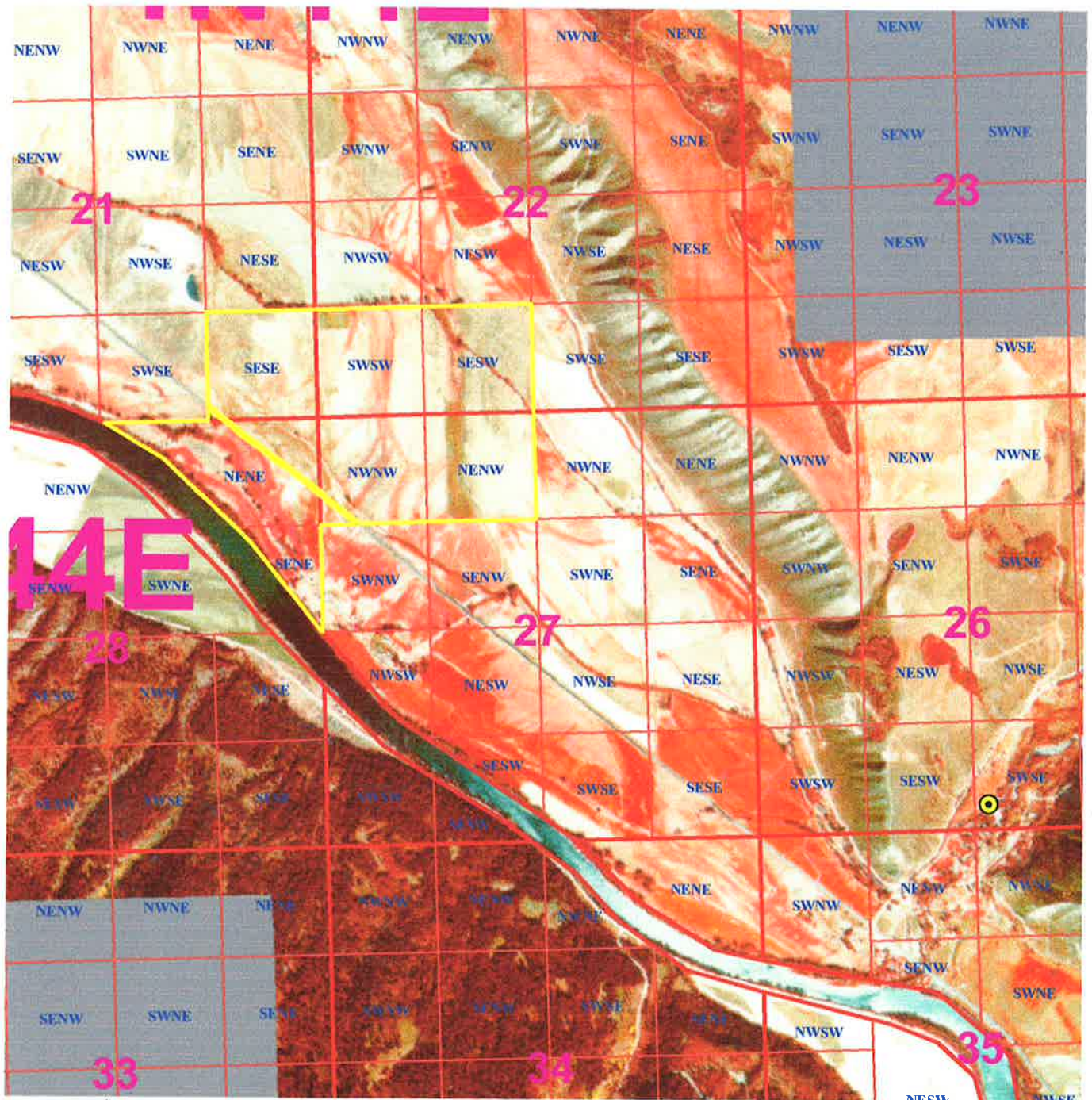
SPATIAL
DYNAMICS

9/30/03

Water Right Claim Number 23-00012

Townships , 5N38E, 1N44E

01/08/2001



SPATIAL
DYNAMICS

02/02/2004

**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:

Water right number: 23-12

WADE R FLEMING

4319 N 55 E

IDAHO FALLS ID 83401

Telephone Number: (208)523-2009

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:

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

DATE: 3-16-04 SIGNATURE: Wade Fleming

Please print your name: Wade Fleming

IDWR Regional Office,

Wade R. Fleming
4319 N. 55 E
Idaho Falls, Idaho 83401
208/523-2009

October 13, 1997

RECEIVED

OCT 21 1997

Department of Water Resources

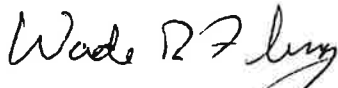
State of Idaho
Department of Water Resources
1301 North Orchard Street
P.O. Box 83720
Boise, Idaho 83720-0098

Dear Sir,

This letter is in reference to the attached 10/7/97 IDWR address correction confirmation letter. The letter shows SRBA Water Right No. A01-00035V, A01-00115P, A01-10379, A23-00012, A23-00013A, A23-04039, A23-04060, A2310210, A23-10211, & A23-10213 for address correction. In addition to these, the following SRBA Water Right No.'s should also be changed to the new address A01-07073, A23-10214, A23-10215, & 23-00003.

Please contact me if additional information is required.

Sincerely,


Wade R. Fleming

Enclosure

IDRW1097



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. BOX 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

October 7, 1997

RECEIVED

PHILIP E. BATT
GOVERNOR

OCT 21 1997

KARL J. DREHER
DIRECTOR

WADE R FLEMING
4319 N 55 E
IDAHO FALLS ID 83401

Department of Water Resources

Re: Snake River Basin Adjudication (SRBA)
Water Right No. A01-00035V, A01-00115P, A01-10379, A23-00012, A23-00013A,
A23-04039, A23-04060, A23-10210, A23-10211, & A23-10213
Change of Address

Dear Water Right Holder:

IDWR has been notified the address presently on our records is incorrect. Although we have reached you at the address above we need your written confirmation this is your correct mailing address before we can change our records. Future notices related to your water right can be sent only to the address on your claim or as otherwise changed by you.

Please sign your name at the bottom of this letter and return it to this office postmarked by October 22, 1997. Make corrections to your name and address if necessary before returning this letter. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records.

If there has been a change in ownership of any of the properties connected with the water right referenced above, please call this office toll-free at 1-800-451-4129 to obtain a form to make this required change to the water right records.

Yours truly,

Danni M. Smith
SRBA Sr. Secretary

The address is correct as shown above or as otherwise changed.

Signature of water right claimant

1/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME FLEMINGCLAIM NO. A23-00012DATE RECEIVED 9/13/89

CK # _____

AMOUNT \$ _____

YES NO Required Info?

1. Is the name and address complete with zip code? X --- *
2. Is a priority date entered? X --- *
- Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. X --- *
3. (a) Is a source entered? X --- *
- x (b) Is a tributary to entered? (if required) N/A X --- *
4. Is the legal description of the p.d. sufficient? X --- *
5. Is there a description of the diverting works? X --- *
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. X --- *
- Is the period of use included? X --- *
- Is a quantity claimed for each use? X --- *
7. Is a total quantity claimed entered? X --- *
- x 8. If required is a consumptive use entered? N/A X --- *
- x Is the consumptive use correct? N/A X --- *
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. N/A X --- *
10. Is (are) the place(s) of use and purpose(s) indicated? X --- *
11. Is (are) the county(ies) entered? X --- *
12. Is the ownership of p.u. checked? X --- *
- x 13. Are other water rights listed or "none" indicated? X --- *
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) N/A X --- *
15. Is the basis of the claim indicated? X --- *
- x 16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) N/A X --- *
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. X --- *
18. Has the claim been signed, sealed, and dated by a notary? X --- *
19. Was this claim filed on time, or was an extension granted? X --- *
20. Is the fee enclosed correct? Exempt X --- *
- x 21. If this claim is based on an existing water right, has the identification number been entered? N/A X --- *
22. Should this claim be data entered? X --- *

Claim checked by: TO Date: 9/21/89Claim must be returned to claimant: (Yes) X (No)Claimant must be notified of modifications: (Yes) X (No)Receipt Prepared by: SK
Claim data entered by: SK
Sent to claimant by: SK

Date: _____

Date: 10/5/89

Date: _____

Checked by: _____ Date: _____

Comments: _____

MICROFILMED

NOV 07 1992

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: A23-00012
Date Received: 9/13/1989
Receipt No: E010322
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: WADE R. FLEMING 208-523-2009
Address: P.O. BOX 2114
IDAHO FALLS, ID 83403

2. Date of Priority: MAY 20, 1889

3. Source: PALISADES CREEK Trib. to: SNAKE RIVER SOUTH F

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
01N	44E	26	SW	SW	SE		BONNEVILLE

5. Description of diverting works:

HEADGATE AND DITCH FROM PALISADES CANAL TO FLOOD OR SPINKLER IRRIGATION

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	3.200		

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

A.F.A.

8. Total consumptive use is 640.0 Acre Feet Per Annum.

9. Non-irrigation uses:
150 HEAD CATTLE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
01N	44E	21	SE	SE		IRR	40.0

Section Acres 40.0

A23-00012

Page 1

Date: 10/05/89

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NOV 07 1992

10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
01N	44E	22	SW	SW		IRR	40.0
			SE	SW		IRR	40.0
			Section Acres				80.0
		27	NE	NW		IRR	36.0
			NW	NW		IRR	29.0
			Section Acres				65.0
		28	NE	NE		IRR	40.0
			NW	NE		IRR	12.0
			SE	NE		IRR	19.0
			Section Acres				71.0
			Total Acres				256.0

11. Place of use in counties: BONNEVILLE

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

13. Other Water Rights Used:
01-00115P/01-00035V/23-00013

14. Remarks:

15. Basis of Claim: DECREED
Case Number:
Court :
Decree date:

Decree Plaintiff

vs

Decree Defendant

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 #23-00012Date Received 9-13-1989Receipt Number E010322

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Wade R. Fleming Phone (208) 523-2009
Mailing Address P.O. Box 2114 Idaho Falls, Idaho Zip 83403
2. Date of Priority (Only one (1) per claim) May 20, 1889
3. Source of water supply (a) Palisades Creek
which is tributary to (b) Snake River - South Fork
4. a. Location of existing point of diversion is: Township 1N Range 44E Section 26 ^{WR 7 9/13/89}
SW 1/4 of SW 1/4 of SE 1/4, Govt. Lot, Bonneville ^{WR 7 9/13/89}
Additional points of diversion if any: _____
- b. If instream flow, beginning point of claimed instream flow is:
Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,
Govt. Lot _____ B.M., County of _____
ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____
_____ 1/4, Govt. Lot _____ B.M., County of _____
5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. Headgate and ditch from
Palisades Canal to flood or sprinkler irrigation

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NOV 07 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Irrigation purposes from 4-1 to 11-1 amount 3,200 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 3,200 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 640 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) 150 head cattle

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>IN</u>	<u>44E</u>	<u>21</u>																<u>40</u>	<u>40</u>
		<u>22</u>											<u>40</u>	<u>40</u>					<u>80</u>
		<u>27</u>					<u>36</u>	<u>29</u>											<u>65</u>
		<u>28</u>	<u>40</u>	<u>12</u>		<u>19</u>													<u>71</u>

Total number of acres irrigated 256

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

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
01-00115P / 0100035V / #23-00013 or None ()

14. Remarks:

Last Name Fleming Ident No. #23-00012

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License _____ Permit _____
Decree X
If applicable provide IDWR Water Right Number 23-00012
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

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 do solemnly swear or affirm that the statements contained in the foregoing document are true
and correct.

Signature of Claimant (s) Wade R Fleming Date 9/13/89

Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____
Title and Organization _____ Date _____

State of Idaho/or _____)
County of Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 13 day of Sept. 19 89
SEAL Notary Public Ernest Carlson
Residing at Idaho Falls, ID.
My Commission Expires 6-14-1994.

Please Print Name

17. Notice of Appearance:
Notice is hereby given that I, _____ will be acting as attorney at law on behalf
of 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.

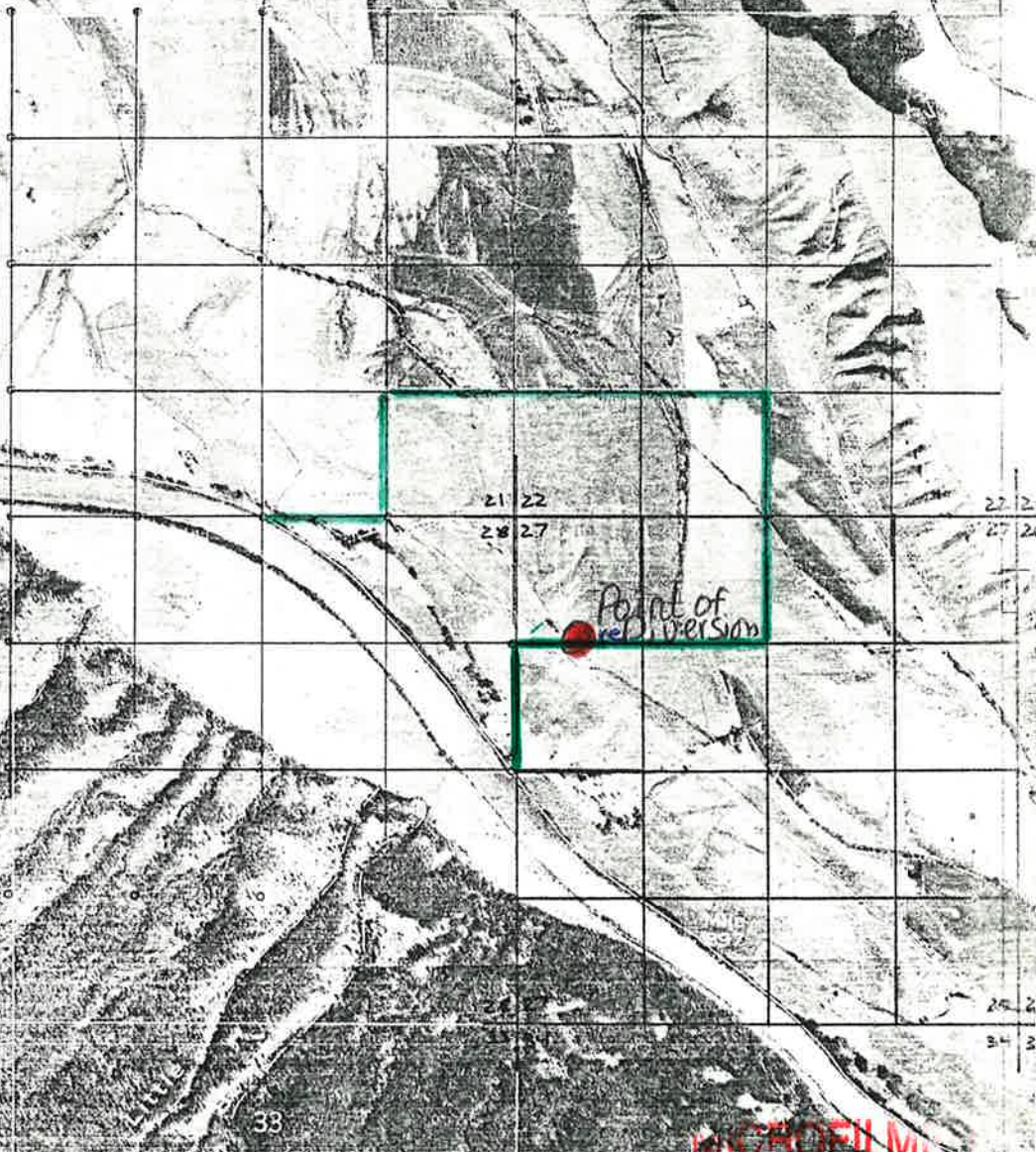
Signature _____
Address _____
Date _____

MICROFILMED
NOV 07 1992

Last Name Fleming Ident. Number 23-00012

Copies White-State, Yellow-Claimant

Township 1N
Range 44E
Sections
21, 22, 27, 28
Bonneville County



MICROFILM
NOV 6 7 1992

Fleming # 23-00012

479000m.E.

111 15



630 000
FEET

43°22'30"

111°15'

750 000 FEET

Produced and published by the Geological Survey
in cooperation with the U.S. Forest Service

NOV 07 1992
NOV 07 1992