Form No. 42-1409-2 (Internet 7/17)

DISTRICT COURT - SRBA
Fifth Judicial District
County of Twin Falls - State of Idaho

FEB 17 2023

Clerk

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 CA	SE NUMBER: 39576	Deputy Clerk
Claim ID: _		
Date Recei	ved:	
Receipt No	:	
Claim Fee:	By:	

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

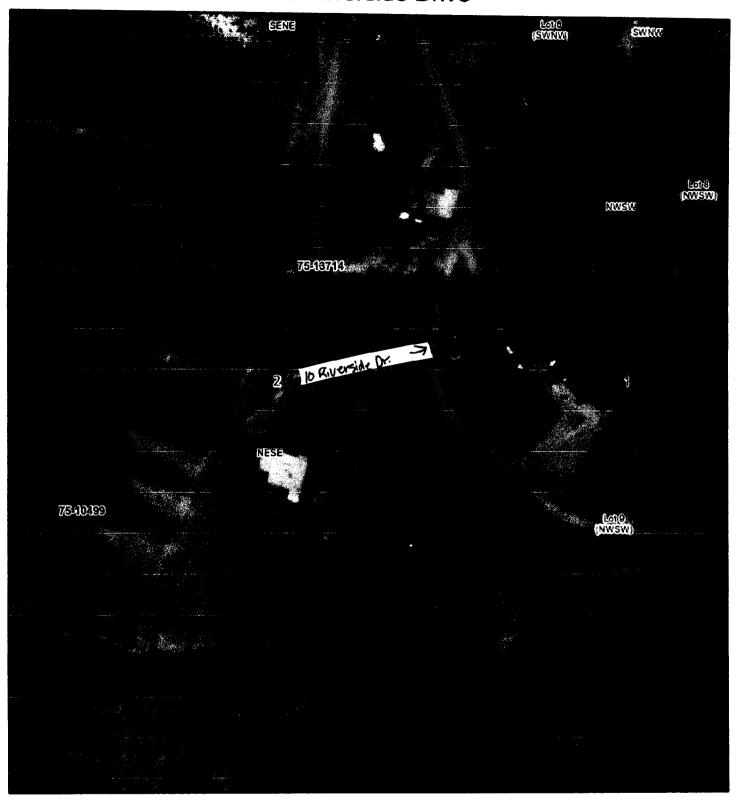
For Domestic and/or Stockwater Purposes Where Daily Use is less than 13,000 gallons per day

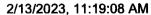
Please type or print clearly

1.	Name of claimant(s) Sadie Barrett Phone (208) 469-0533		
	Mailing address 10 Riverside Drive Salmon, ID Zip 83467 Street or Box City State		
	Email address (optional) sadie.barrett@icloud.com		
2.	Date of priority: (Only one per claim) May 1, 1968 (Explain priority date selected in Remarks) Month/Day/Year (YYYY)		
3.	Source of water supply (Check one) <u>Ground Water</u> () or Other (✓) (a) <u>Spring</u> (Lake Creek Spring)		
	which is tributary to (b) Lake Creek		
4 .	Location of point of diversion is: Township 19N , Range 21E , Section 2		
	Parcel no. RP 000690080130		
	Additional points of diversion, if any: N/A		
	If available, GPS coordinates:		
5.	Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any chang or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the dep each well. Trow collection pipes flow into a 10,000 tank and is diverted into 2" and 4" inch pipes, which deliver water to		
	residence.		
6.	Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)		
	Month/Day Month/Day cfs (√) or AFY () For		
	For purposes from to amount		
7.	Total quantity claimed cfs (✓) or AFY ()		
8.	Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind) Domestic- 1 home		

9.	Location of place of use is: Township 19N, Range 21E, Section 2		
	NE 1/4 of SE 1/4, Govt. Lot BM, Parcel no. RP 00068004002A		
	for (check one) Domestic () Stock () Domestic and Stock ()		
	Additional places of use, if any T19N 21E Section 1 NW/SW (Residence is split between two sections)		
10.	In which county(ies) are lands listed above as place of use located? Lemhi		
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): The priority date is when the spring was developed and pipeline installed. Water was delivered to my residence		
	at that time.		
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 75-15064		
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: Feb 13, 2023		
	Date:		
For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have foregoing document in the space below as the			
	Agent's title (Please print) Of		
	and that the statements contained in the foregoing document are true and correct.		
	Signature of Authorized Agent Date		
	Printed Name of Authorized Agent		
16.	Notice of Appearance: Notice is hereby given that I, (please print), 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		
Nar	ne of claimant(s) Sadie Barrett Claim ID		

10 Riverside Drive



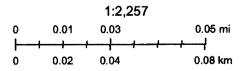


POD - Water Rights

Quarter Quarters

PLS Sections

L____ Townships



Maxar, Microsoft

