

STATE OF NEVADA

PROOF OF APPROPRIATION OF WATER FOR STOCK WATERING OR WILDLIFE PURPOSES

(1) Name of claimant Jose Barinaga Trust, Marilyn R. Barinaga- Trustee & Marilyn R. Barinaga
854 E. 3600 North of Castleford
Street and No. or P. O. Box No. City or Town
Idaho 83321
State and Zip Code No.

(2) Source of water Deadman Creek
Name of natural water source

(3) The water is diverted by Natural Channel
Dam, ditch, pipe line, natural channel, spring area, etc.

(4) The water is diverted at the following point(s) Throughout the reach of the creek,
Describe as being within a 40-acre subdivision on public survey, and by course and distance to a section corner. If on unsurveyed land it should be stated.

commencing at a point within the SW 1/4 SE 1/4 of Section 14, T.47N., R.60E. M.D.B.&M. from which
Diversion over a channel reach must be described by course and distance to a section corner for both the beginning and end of such reach.

the NE corner of Section 15, T.47N., R.60E. M.D.B.&M. bears ^N 82°45'00" ^W a distance of 5,885.0

feet thence down the stream channel to the point of ending within the NW 1/4 SE 1/4 of Section 15 T.47N.,

R.60E., M.D.B.&M. from which the NE corner of Section 15, T.47N., R.60E. M.D.B.&M. bears

^N 83°41'00" ^E a distance of 3,770.0 feet.

(5) The water is impounded in Natural Channel
Troughs, tanks, pools, reservoir, natural channel, etc.

(6) The construction of the ditch or other works was begun N/A Date

and completed _____
Date

(7) The nature of the claimant's title to the land upon which the source of water and place or use are located is BLM Allotment No. 01066
Patented, deeded, public domain with grazing permit, etc.

(8) The Claimant's water right xxx (was not) recorded in the office of the County Recorder of _____
County, at Page _____ of Book _____ of _____

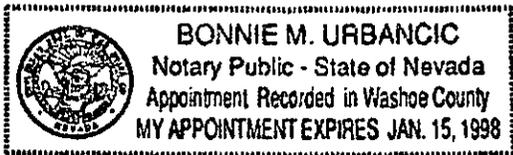
Remarks _____

The undersigned, being duly sworn, deposes and says that the facts relative to the appropriation of water by Jose Barinaga Trust, Marilyn R. Barinaga- Trustee & Marilyn R. Barinaga are full and correct to the best of his knowledge and belief.

The undersigned deponent is acting as agent for the claimant.
If proof is not made by claimant, deponent should state on this line by virtue of what authority he represents the claimant.

Jose Barinaga Trust, Marilyn R. Barinaga- Trustee & Marilyn R. Barinaga
Claimant

Telephone No. (208) 537-6645



By *Clare N. Mahannah*
Clare N. Mahannah, P.E.
P.O. Box 9066
Street and No., or P.O. Box No.
Reno, NV 89507
City, State, Zip Code No.

Telephone No. (747) 747-1100

Subscribed and sworn to before me this 14th day of JUNE, 19 95.

Bonnie M. Urbancic

Notary Public in and for the County of WASHOE

My commision expires 1/15/98

\$50 FILING FEE MUST ACCOMPANY PROOF