

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: A01-10099
Date Received: 7/11/1989
Receipt No: M003882
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JERRY R. BECKER 208-522-4199
Address: 3050 N. 45 W.
IDAHO FALLS, ID 83402

2. Date of Priority: JUN 01, 1891

3. Source: SNAKE RIVER Trib. to: COLUMBIA RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
04N	37E	35	NE	NE	NE		JEFFERSON

5. Description of diverting works:
WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	2.000		

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

8. Total consumptive use is 305.0 Acre Feet Per Annum.

9. Non-irrigation uses:
S/200 HD CATTLE W FALL

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
02N	37E	9	NE	NW		IRR	40.0
			NW	NW		IRR	18.0
			SW	NW		IRR	24.0

A01-10099

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Date: 08/08/89

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10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
02N	37E	9	SE NW		IRR	40.0

Section Acres 122.0

Total Acres 122.0

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:
PALISADES STORAGE RTS

14. Remarks:
FILED AS PORTION OF 01-00083S GIVEN TO HOLL'S PECKER UNDER TRANSF
ER 934. OLD WATER RIGHT NO.A01-00083S

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 FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number A01-10099Date Received 7-15-89Receipt Number @ 11003882
221

A0110099

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) JERRY R. BECKER Phone () 5224199Mailing Address 3050 N 45 W, IDAHO FALLS, ID. Zip 834022. Date of Priority (Only one (1) per claim) JUNE 1, 18913. Source of water supply (a) SNAKE RIVER
which is tributary to (b) COLUMBIA RIVER4. a. Location of existing point of diversion is: Township 4N Range 37E Section 3S,
1/4 of NE 1/4 of NE 1/4, Govt. Lot, B.M., County of JEFFERSON

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. HEADWORKS OF GREAT WESTERNCANAL - DIVERSION DAM TO CONCRETE HEADGATES INTO
CANAL. WATER DELIVERED TO PLACE OF USE THROUGH
OAKLAND CANAL. USED BY CARRING AGREEMENT W/ NEW
SWEDED IRRIGATION DIST.

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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 2.00 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 2.00 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 305 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) INCIDENTAL STOCKWATERING OF 200 HEAD OF CATTLE W FALL.

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	
2N	37E	9					40	18	24	40									122

Total number of acres irrigated 122

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.
PALISADES STORAGE RTS. or None ()

14. Remarks: FILED AS PORTION OF 01-000833 GIVEN TO
HOLLIS BECKER UNDER TRANSFER 934.

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Last Name BECKER Ident No. 401-10099

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License _____ Permit _____

Decree ☒

If applicable provide IDWR Water Right Number W-000838

Court _____ Case Number _____ Decree Date 12-16-1910

Plaintiff vs Defendant BEXBURG IRR. Co. VS. TETON IRR. COMPANY ET AL.

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) [Signature] Date 7-11-89

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 11 day of July 1989

SEAL

Notary Public [Signature]

Residing at Idaho Falls, Id.

My Commission Expires 22 Aug 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 _____

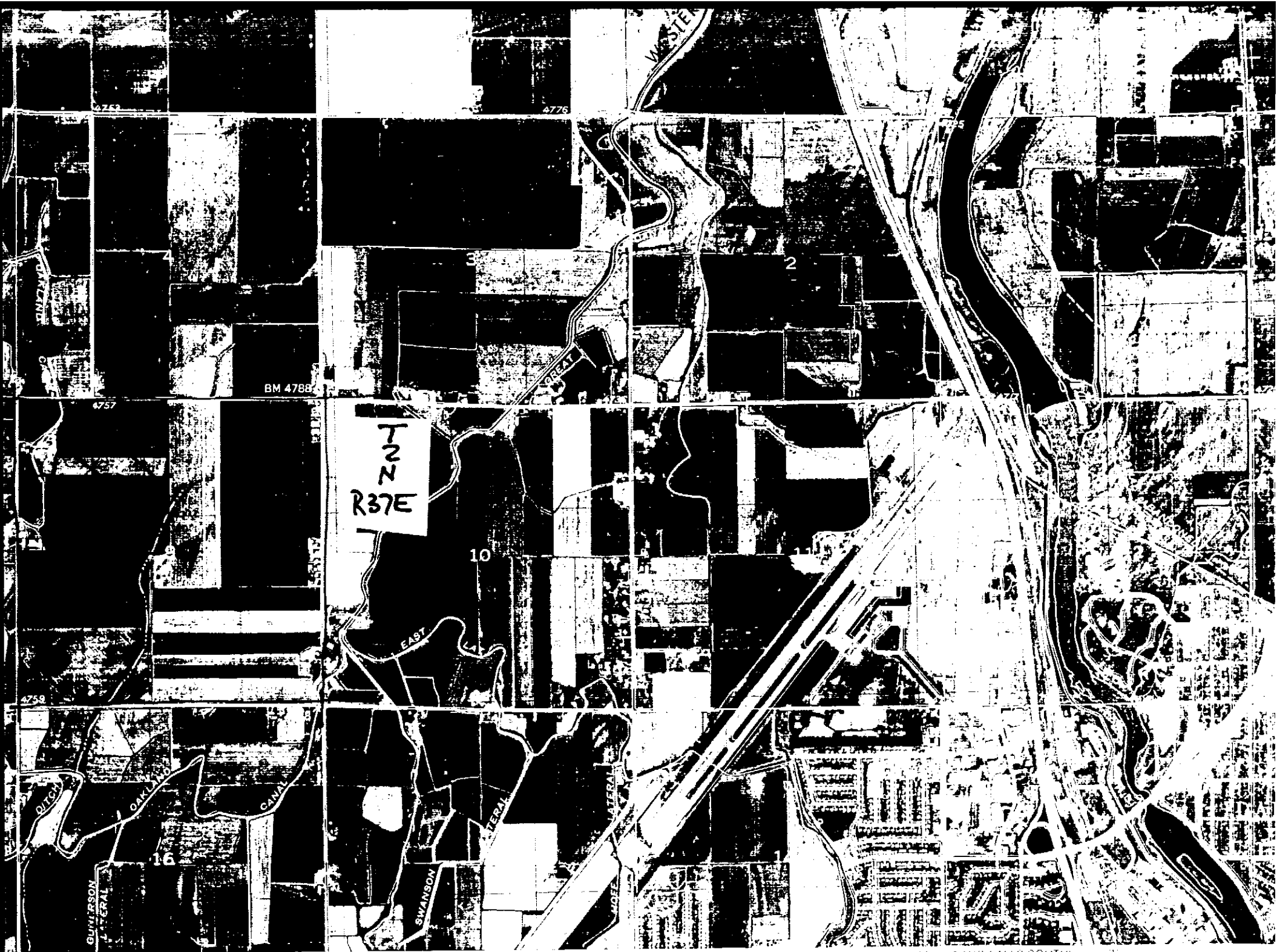
Date _____

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Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant



OCT 20 1992

IDAHO FALLS SOUTH

4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME Jerry B. BakerCLAIM NO. 401-10094DATE RECEIVED 2-11-89CR # AMOUNT \$ 172.00

YES

NO

Required
Info?

1. Is the name and address complete with zip code? ☐ YES ☐ NO ☐ *
2. Is a priority date entered? ☐ YES ☐ NO ☐ *
- Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. ☐ YES ☐ NO ☐ *
3. (a) Is a source entered? ☐ YES ☐ NO ☐ *
- (b) Is a tributary to entered? (if required) ☐ YES ☐ NO ☐ N/A ☐ *
4. Is the legal description of the p.d. sufficient? ☐ YES ☐ NO ☐ *
5. Is there a description of the diverting works? ☐ YES ☐ NO ☐ *
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. ☐ YES ☐ NO ☐ *
- Is the period of use included? ☐ YES ☐ NO ☐ *
- Is a quantity claimed for each use? ☐ YES ☐ NO ☐ *
7. Is a total quantity claimed entered? ☐ YES ☐ NO ☐ *
8. If required is a consumptive use entered? ☐ YES ☐ NO ☐ N/A ☐ *
- Is the consumptive use correct? ☐ YES ☐ NO ☐ N/A ☐ *
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 owner-
ship must be stated. If not under single ownership, see
Adjudication Memo # 4. ☐ YES ☐ NO ☐ N/A ☐ *
10. Is (are) the place(s) of use and purpose(s) indicated? ☐ YES ☐ NO ☐ *
11. Is (are) the county(ies) entered? ☐ YES ☐ NO ☐ *
12. Is the ownership of p.u. checked? ☐ YES ☐ NO ☐ *
13. Are other water rights listed or "none" indicated? ☐ YES ☐ NO ☐ *
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.) ☐ YES ☐ NO ☐ N/A ☐ *
15. Is the basis of the claim indicated? ☐ YES ☐ NO ☐ *
16. If the claimant requested a monthly docket sheet, is payment enclosed?
(If yes, describe payment status in "Comments" below.) ☐ YES ☐ NO ☐ N/A ☐ *
17. Is the claim signed by the claimant, and is the signature appropriate?
Organizations must complete the organization block. ☐ YES ☐ NO ☐ *
18. Has the claim been signed, sealed, and dated by a notary? ☐ YES ☐ NO ☐ *
19. Was this claim filed on time, or was an extension granted? ☐ YES ☐ NO ☐ *
20. Is the fee enclosed correct? ☐ YES ☐ NO ☐ Exempt ☐ *
21. If this claim is based on an existing water right, has the
identification number been entered? ☐ YES ☐ NO ☐ N/A ☐ *
22. Should this claim be data entered? ☐ YES ☐ NO ☐ *

Claim checked by: ESBDate: 2-11-89Claim must be returned to claimant: ☐ (Yes) ☐ (No)Claimant must be notified of modifications: ☐ (Yes) ☐ (No)Receipt Prepared by: Claim data entered by: ES-8-8-89Sent to claimant by: Date: Date: Date: Checked by: Date: Comments: Old right Number401-000838 (\$"AS IN SALT)

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