

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: A21-07089
Date Received: 3/23/1989
Receipt No: E007035
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: VAL HAMMOND 208-624-7456
Address: RT 2, BOX 21
ST. ANTHONY, ID 83445

2. Date of Priority: MAY 13, 1976

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07N	39E	1	NE	NE	NE		FREMONT

5. Description of diverting works:
WELL, PUMP & SPRINKLERS.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/15	11/15	1.920		336.00

7. Total Quantity Appropriated is:
1.920 C.F.S. (and/or) 336.00 A.F.A.

8. Total consumptive use is 336.0 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07N	39E	1	NE	NE		IRR	32.0
			NW	NE		IRR	32.0
			SW	NE		IRR	32.0

Section Acres 96.0

A21-07089

Page 1

Date: 05/03/89

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10. Place of Use: Continued

Total Acres 96.0

11. Place of use in counties: FREMONT

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

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: LICENSE

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 _____

NO LATE FEE IF RECEIVED

BY 4/28/89

E.D.

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
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RECEIVED

APR 28 1989

Department of Water Resources
Eastern District OfficeNOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

MAR 27 1989

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) VAL HAMMOND Phone () 208-624-7456Mailing Address RT. 2 Box # 21 ST. Anthony Zip 834452. Date of Priority (Only one (1) per claim) May 13, 19763. Source of water supply (a) Well
which is tributary to (b) _____4. a. Location of existing point of diversion is: Township 7N Range 39E Section 1~~NE 1/4~~ 1/4 of ~~NE 1/4~~ 1/4 of ~~NE 1/4~~ 1/4, Govt. Lot, _____ B.M., County of FremontNE 1/4 NE 1/4

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.Well was finished 4-15-76,
16" cased well with a depth of 142'. Static level of
well is 20' with no draw down, at 1000 gallons per minute

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Ranch

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Irrigation purposes from 3-15 to 11-15 amount 1.92 or 336.0
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1.92 (cfs) and/or (b) 336.0 (acre feet)

8. Total consumptive use claimed is 336.0 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Does not apply

10. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
~~7~~	~~39~~	~~1~~	~~30~~	~~30~~	~~30~~	~~30~~													~~120~~
7N	39N	1	32	32	32														96

Total number of acres irrigated 96

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

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. _____ or None (X)

14. Remarks:

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Last Name _____ Ident No. _____

Copies: White - State, Yellow - Claimant

Scale: 2 inches equals 1 mile

A 15x15 grid of graph paper. The grid is divided into four quadrants by a vertical line between the 8th and 9th columns and a horizontal line between the 8th and 9th rows. In the top-left quadrant, the letters 'T', '7', and 'S' are written vertically in the 9th column. In the top-right quadrant, the letter 'R' is written in the 11th column, and a circled area containing the number '39' is located in the 12th column, 1st row. The rest of the grid is empty.

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Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use X Posted Notice _____ License 21-7089 Permit ~~21-7089~~

Decree _____
If applicable provide IDWR Water Right Number _____
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 X
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) Val D Hammond Date 3-22-89

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 Idaho)
County of Madison) ss.

Subscribed and sworn (or affirmed) before me this 22nd day of March 19 89

SEAL

Notary Public Muriel W. Fidd
Residing at Rexburg Id
My Commission Expires 11-9-93

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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OCT 21 1992

Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant



State of Idaho
DEPARTMENT OF WATER RESOURCES

900 N. Skyline Dr., Idaho Falls, Idaho 83402-1718 - (208) 525-7161 - Fax (208) 525-7177

EASTERN REGION

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

MAY 15, 1997

VAL HAMMOND
2050 E 600 N
ST ANTHONY ID 83445

RE: CHANGE IN ADDRESS FOR A21-07089

Dear Sir:

Your Eastern Water Measurement District bill was recently returned to our office because there was an old address on file. I have updated my records with information obtained from the phone book, but my original information came from the records of the Snake River Basin Adjudication (SRBA).

I have enclosed the change of address form the SRBA uses to change their records. I recommend that you complete this form and return it to Jo Thompson, Department of Water Resources, 900 N Skyline Dr.; Idaho Falls , ID 83402, so that all future correspondence regarding your water right is mailed to the correct address.

Please do not hesitate to contact this office if you have any questions regarding this matter (525-7161).

Respectfully submitted,


for Wendy Murphy
Administrative Assistant

Enclosure



State of Idaho

DEPARTMENT OF WATER RESOURCES

150 Shoup Ave., Suite 15, Idaho Falls, Idaho 83402 - (208) 525-7161

EASTERN REGION

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

Date: March 28, 1989

Val D. Hammond
Rt. 2, Box 21
St. Anthony, ID 83445

RE: Water Right Claim Returned

Dear Mr. Hammond:

The Idaho Department of Water Resources (IDWR) is returning your check #1891 (\$145.00) and Notices of Claim to a Water Right because of insufficient information. All items on the claim forms must be correctly completed and fees submitted before the IDWR can process the claim.

Please complete or correct the claim form items identified below and return the form to the IDWR within 30 days of the date of this letter if you wish to enter your claim in the Snake River Basin Adjudication. Failure to submit the required information and filing fees within the 30-day period may result in an assessment of an additional \$50.00 late-fee.

Domestic/Stock Well

- Item #2: The priority date is the date water was first used for your domestic purposes. The adjudication is only for uses that began before November 20, 1987. If your priority date is after this date you are not required to submit a claim form. Please correct the priority date and return the form only if it was used before 11/20/1987.
- Item #4: The location of the well must be defined to at least the 1/4 of 1/4 Section (40-acre tract). If you do not know the precise legal description, you may indicate the location on a USGS topographic map.
- Item #7: The total quantity claimed is usually the sum of the amounts listed in Item #6, limited by the capacity of the well.

Irrigation Well

- Items #2, #4, #6, #9, and #15: These items disagree with the information on Water Right License 21-7089 (copy enclosed). These items should be identical to the information on the license unless you disagree with the licensed data.

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If you have expanded the acreage since the issuance of the license, you must complete a separate Notice of Claim to a Water Right for the expanded acreage listing the date of priority as the date the additional ground was first irrigated by the well, or file an "Application for Permit" for the expanded acreage. The IDWR recommends filing the "Application for Permit" for the acreage not covered by the license.

Note: The consumptive use in Item #8 should be equal to 2.5 multiplied by the total acreage claimed. If the claimed acreage is modified for the claim, please also change the claim-form map.

The filing fee for the Domestic/Stock claim (if returned) is \$25.00. The filing fee for each irrigation claim is \$50.00 plus \$1.00 per acre.

I have enclosed new claim forms if needed. If you have any questions, please call Tony Olenichak, Water Right Agent, at (208)-525-7161.

Sincerely,

Ernest Carlsen
by Tony Olenichak

Ernest Carlsen
Adjudication Supervisor

Enclosure

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OCT 21 1984

4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME HAMMOND CLAIM NO. A21-07089

- DATE RECEIVED 3/23/89 CK # _____ AMOUNT \$ _____
- | | YES | NO | Required Info? |
|--|----------|----------|----------------|
| 1. Is the name and address complete with zip code? | <u>X</u> | | * |
| 2. Is a priority date entered? | <u>X</u> | | * |
| Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. | | | |
| 3. (a) Is a source entered? | <u>X</u> | | * |
| x (b) Is a tributary to entered? (if required) N/A | | | |
| 4. Is the legal description of the p.d. sufficient? | <u>X</u> | | * |
| 5. Is there a description of the diverting works? | <u>X</u> | | |
| 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. | <u>X</u> | | * |
| Is the period of use included? | <u>X</u> | | |
| Is a quantity claimed for each use? | <u>X</u> | | * |
| 7. Is a total quantity claimed entered? | <u>X</u> | | |
| x 8. If required is a consumptive use entered? N/A | <u>X</u> | | |
| x Is the consumptive use correct? N/A | | <u>X</u> | |
| 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. | <u>X</u> | | * |
| 10. Is (are) the place(s) of use and purpose(s) indicated? | <u>X</u> | | * |
| 11. Is (are) the county(ies) entered? | <u>X</u> | | |
| 12. Is the ownership of p.u. checked? | <u>X</u> | | |
| x 13. Are other water rights listed or "none" indicated? | <u>X</u> | | |
| 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 | <u>X</u> | | |
| 15. Is the basis of the claim indicated? | <u>X</u> | | |
| x 16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) N/A | <u>X</u> | | |
| 17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. | <u>X</u> | | * |
| 18. Has the claim been signed, sealed, and dated by a notary? | <u>X</u> | | * |
| 19. Was this claim filed on time, or was an extension granted? | <u>X</u> | | * |
| 20. Is the fee enclosed correct? Exempt | <u>X</u> | | * |
| x 21. If this claim is based on an existing water right, has the identification number been entered? N/A | <u>X</u> | | |
| 22. Should this claim be data entered? | <u>X</u> | | |

Claim checked by: TO Date: 5/3/89Claim must be returned to claimant: (Yes) X (No)Claimant must be notified of modifications: X (Yes) (No)

Receipt Prepared by: _____ Date: _____
Claim data entered by: _____ Date: _____
Sent to claimant by: _____ Date: _____
Checked by: _____ Date: _____

Comments: (15) CODE BASIS OF CLAIM AS LICENSE

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(6) PERIOD OF USE DIFFERS FROM LICENSE.

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