

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: A24-02038
Date Received: 2/15/1990
Receipt No: E012073
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SCOTT CARLISLE 801-322-0471
Address: STAR VALLEY TROUT RANCH
C/O CRAIG P. ORROCK
433 SOUTH 400 EAST
SALT LAKE CITY, UT 84111

2. Date of Priority: MAR 23, 1946

3. Source: SPRING CREEK Trib. to: TYGEE CREEK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	46E	32	SE	NE			CARIBOU

5. Description of diverting works:
NONE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
FISH PROPAGATION	01/01	12/31	3.000		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
FISH PROPAGATION

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	46E	32	SE	NE		FISH	

A24-02038

Page 1

Date: 02/16/90

MICROFILMED
NOV 06 1992

A2402038



11. Place of use in counties: CARIBOU

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

13. Other Water Rights Used:
NONE

14. Remarks:

ADDRESS OF STAR VALLEY TROUT RANCH: P.O. BOX 1266, AFTON, WY
(208) 225-3543.

ACQUIRED TITLE TO THE PROPERTY FROM JAMES AND MARYBELLE GRASSE
9-28-88.

15. Basis of Claim: LICENSE
Water Right Number: 19791

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 A24-02038Date Received 2-15-90Receipt Number E01207

**NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW**

RECEIVED

FEB 16 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Scott Carlisle (208) 225-3543 Phone (801) 322-0471
Mailing Address Star Valley Trout Ranch, P.O. Box 1266, Afton, WY 83110
c/o Craig P. Orrock, 433 South 400 East, SLC, UT Zip 84111

2. Date of Priority (Only one (1) per claim) 3/23/46

3. Source of water supply (a) Spring Creek, Tributary of Tygee Creek
which is tributary to (b) STUMP CREEK

4. a. Location of existing point of diversion is: Township 7S Range 46E Section 32,
SE 1/4 of NE 1/4 of 1/4, Govt. Lot, B.M., County of Caribou

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. None

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NOV 6 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Fish Propagation purposes from 1/1 to 12/31 amount 3CFS 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 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 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.) Fish Propagation

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	
7	46	32				H													

Total number of acres irrigated N/A

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

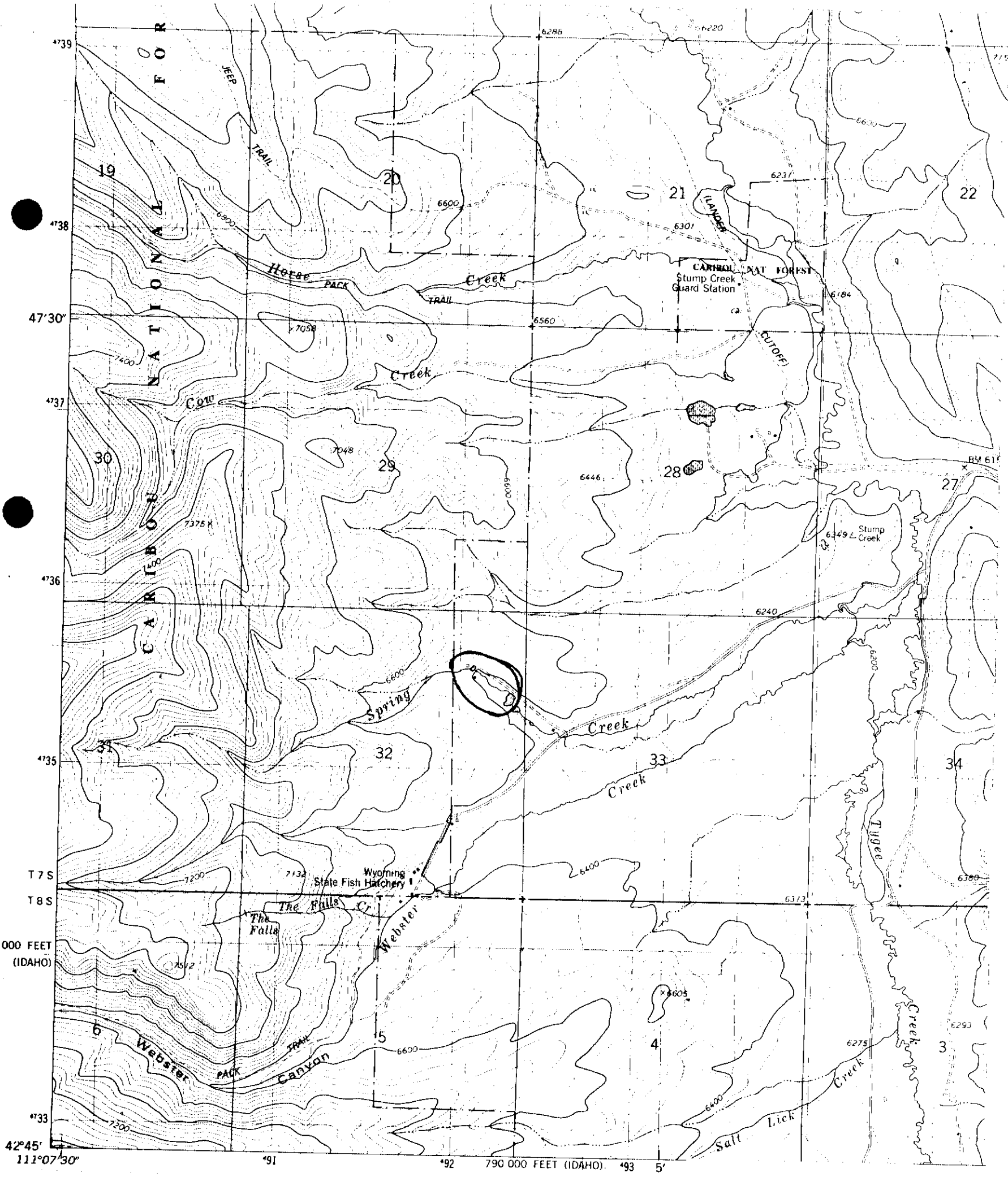
12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
Domestic and Irrigation or None ()

14. Remarks: Acquired title to the property from James and Marybelle Grasse 9-28-88.

Last Name Carlisle Ident No. _____

NOV 06 1992
Copies: White -State, Yellow-Claimant



Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

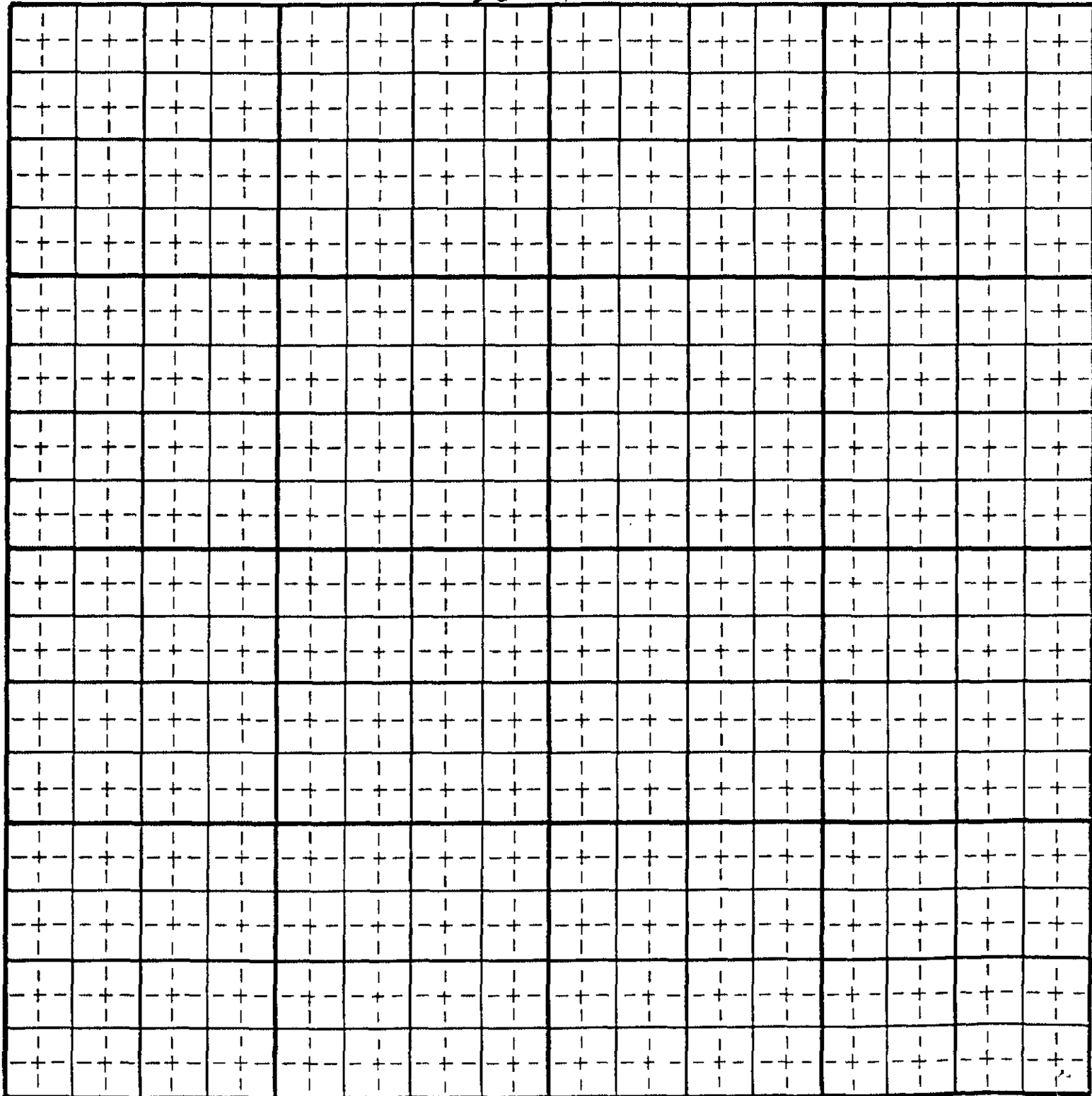
32

7S

46E

Scale: 2 inches equals 1 mile

SEE ATTACHED GEOLOGICAL SURVEY MAP



MICROFILMED

NOV 6 1954

Last Name Carlisle Ident No. _____

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License X Permit _____
Decree _____ 24-02038
If applicable provide IDWR Water Right Number _____ Priority Date _____
Court _____ Case Number _____ Decree Date 3-27-46
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) Scott Carlisle Date 2-13-90
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 Scott Carlisle
Title and Organization _____ Date 2-13-90

State of Idaho/or Wyo.)
County of Lincoln) SS.

Subscribed and sworn (or affirmed) before me this 13th day of Feb. 1990

SEAL

Notary Public Jane R. Wilkes

Residing at Afton, Wyo.

My Commission Expires JUNE 8, WILKES, NOTARY PUBLIC
Please Print Name My Commission Expires July 16, 1993
Residing in Afton Wyoming

17. Notice of Appearance:

Notice is hereby given that I, Craig P. Orrock 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 Craig P. Orrock

Address 433 South 400 East, Salt Lake City, UT 84111

Date 2-10-90

NOTARIZED

NOV 6 1992

Last Name Carlisle Ident Number _____

Copies White-State, Yellow-Claimant

From: DWR70::THOMPSON 26-NOV-1991 11:36:25.89
To: DWR03::FRAZEE
CC: THOMPSON
Subj: CARLISLE, SCOTT

SAL, I AM GOING THRU MY INDEX FILE CARD BOX TO UPDATE AS MUCH AS I CAN.
RE: OVERPAYMENT, E012073, A24-02038 & 24-02039... REFUND OF 61.00 WAS REQUEST-
ED FROM BRENA BLOOM (THIS OFFICE) 11-27-90. 192.00 WAS REFUNDED. FURTHER
REQUEST WAS MADE TO RECTIFY MISTAKE. INDEX CARD SHOWS NOTHING TO INDICATE
CORRECTION HAS BEEN MADE. NOTHING IN MY FILE FROM YOU GUYS THAT 61.00 WAS
REFUNDED. IT HAS BEEN A LONG TIME...CAN YOU CHECK FOR ME?

THANKS,
JO/EASTERN

12-2-91

Everything ok now. Claimant sent in ⁸¹ 131.88 192.00
refunded. Correct fees have been paid...
Proper refund to claimant. J.

Shelia, attach to 24-02038

MICROFILMED

NOV 6 1992



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 -(208) 327-7900

CECIL D. ANDRUS

GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

February 14, 1991

Star Valley Trout Ranch
c/o Craig P. Orrock
433 South 400 East
Salt Lake City, UT 84111

*pd \$131.00 2-27-91
Rec'd CO19762 JF*

RE: Snake River Basin Adjudication (SRBA)
Caribou County - #A24-02038 & A24-02039

Dear Mr. Orrock:

We have had no response to our January 4, 1991 letter to you asking you to remit \$131.00.

Without the proper fees to cover the claims referenced above, the claims must be rejected and returned. Unless we receive payment of \$131.00 by March 1, 1991, your claims will be returned.

If you have any questions, please contact me.

Sincerely,

Donald V. Shaff
Manager, Adjudication Section

DVS:sf:state:tf

MICROFILMED

NOV 6 1992

Idaho Department Of Water Resources
Detail Receipt Summary Screen

Date: 01/23/91
Time: 09:52:30.

Rec/No - E012071 AR/No -
From: - STAR VALLEY TROUT RANCH

Receipt Type - CK Doc/No - 2034
Remarks - WRONG TOTL, CK#, SEEE012073

VOIDED RECEIPT

Receipt Date: 02/16/1990

Type Of Payment	Program	Acct	Class	Fee
ADJUDICATION FEE	410162	9337	6490	131.00

Total Due - 131.00

WR/No	WR Fee	WR/No	WR Fee	WR/No	WR Fee
A2402038	80.00	A2402039	51.00		

(ENTER=CONTINUE)

(GOLD7=SELECTION SCREEN)

(GOLD8=CANCEL)

*Ready for permanent file.
They sent back the overpaid \$131.00.*

1/23/91

*Star White
State Office*

*1-23-91 have not rec'd their
pmt yet. -sf
DVS said t/f 2/4/91; then
he'll send a ltr saying
pay up or lose claims.*

UNRECORDED

NOV 6 1991



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

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

TF 2-4-91

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

January 4, 1991

2-14-91 no \$ rec'd. J

Star Valley Trout Ranch
c/o Craig P. Orrock
433 South 400 East
Salt Lake City, UT 84111

RE: Snake River Basin Adjudication (SRBA)
Caribou County - #A24-02038 & A24-02039

Dear Mr. Orrock:

A financial matter was brought to my attention that indicates we became overly generous in the refund of some filing fees. Of the \$192.00 you paid, \$61.00 was to be refunded on the claims referenced above.

Kindly remit \$131.00 to this office, sent to my attention, at the earliest possible moment. We apologize for the inconvenience this may cause you, and appreciate you promptly correcting our error.

If you have any questions, please feel free to contact me.

Sincerely,

Donald V. Shaff
Manager, Adjudication Section

DVS:sf:state:tf

REPRODUCTION

NOV 6 1991

EXPENDITURE VOUCHER

AUDITOR USE

STATE OF IDAHO Office of State Auditor

AGENCY USE

3649
Date 12/17/90
Code 193002

VENDOR: If you require additional information regarding this payment, please contact the State agency listed below.

AGENCY NAME DEPT. OF WATER RESOURCES

Document No.	
Pre-Audit	Date
Warrant No.	

PAY

TO

STAR VALLEY TROUT RANCH
C/O CRAIG P ORROCH
433 S. 400 E.
SALT LAKE CITY, UT 84111

CHECK ONE:

(1) MISCELLANEOUS EXPENDITURE

() STATE CONTRACT

() PURCHASE ORDER

() MISCELLANEOUS
ENCUMBRANCE REQUISITION

- PAYMENT: () PARTIAL () FINAL

Encumbrance Reference No.

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	04 10 162	9337	8831		REFUNDS PER D. SHAFF WR#A24-02038/A24-02039 11/30/90 192.00	192.00	
TOTAL						192.00	

NOTE: Final payment must be accompanied by a receiving copy

TO STATE AUDITOR

Request is hereby made that a warrant be authorized and drawn in payment of the item or items described above. I hereby certify that the items described were ordered by proper authority; that they are necessary in the public service, that the items have been received and accounted for, and that the account as stated is correct and just.

AUDITOR'S CERTIFICATE

I hereby certify that the above account is in proper form; that totals carried hereon are correct; that receipts when required by law or regulation of the State Board of Examiners covering items for which reimbursement is asked are submitted herewith; and that there are funds in the state treasury and balances in appropriation accounts out of which the same may be lawfully paid.

NOV 06 1992

Date

Head of Agency or Institution

State Auditor

REFUND REQUEST

Hold Until To Fiscal 12-1490

TO: Debbie Allen

THRU: Don Shaff

FROM: John Carlson

RE: Payor

Address

Approved Initials/Date Approved 12/12/90Approved 11/30/90

Star Valley Trout Ranch
c/o Craig P. Ormish ← ATT.
433 S. 400E
Salt Lake City UT, 84111

Claimant if NOT Payor Scott CarlisleReceipt # E012073 Attached ✓Logged 11-30-90 ofAmount \$ 192⁰⁰Claim Location RegionW/R #(s) A24-02038 + A24-02039Extension Filed? Y/N NACopy Attached? Y/N NARefund Generated By EMCLate Fees Paid? Y/N NANot Refunded as of 11-30-90 ofOn Receipt # Reason for Refund overpmt.Date of Last Correspondence 02-16-90 of sent by ErnieData Base Modified? Y/N NA By Date

REMARKS:

Claim was probably mailed in. Receipted 2/16/90, day after
deadline.

Overpayment, see Enroute memo. 11/29/90

Receipted Total \$192⁰⁰

Refund \$61⁰⁰ g ac 11/30/90

SF - No ltr needed. Ernie sent

09/20/90

NOV 06 1990

Id. Department Of Water Resources
Receipt Maintenance II - Maint. Screen 1

Date: 11/30/90
Time: 11:36:13

Receipt Number : E012073

Receipt AMT : 192.00

Receipt Type : CK
Date & Time : 02/16/1990 09:31:56
From Payer : STAR VALLEY TROUT RANCH
User ID : ESRBA
Adjust Flag : A
Trans Number : 90-968
AR Number :
Receipt Remarks :
Update Remarks :
Amount Refunded :
Refund Reason :
Refund Name :

Check Number: 2033
Julian Date : -

Rec. Group : W
Trans Yr-Mo : 1990-02

Refund Date : __/__/__

Refund CK No: _____

Receipted Fees : X

Water Right Numbers: X

(ENTER=CONTINUE) (GOLD2=UPDATE)

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NOV 6 1992

Idaho Department Of Water Resources
Receipt Maintenance II - Maint. Screen 2

Date: 11/30/90
Time: 11:36:22

Receipt Number : E012073

Receipt Amt : 192.00

Description	Program	Acct	Class	Fee
ADJUDICATION FEE - SCOTT CARLISLE	410162	9337	6490	131.00
OVERPAYMENT	410162	9337	6490	61.00

(ENTER=CONTINUE)

(GOLD2=UPDATE)

NOV 30 1990

NOV 30 1990

Receipt Number : E012073

Page 1 OF 3

Receipt Amt : 192.00

A2402038	80.00	A2402039	51.00		

(ENTER=CONTINUE) (GOLD2=UPDATE) (GOLD4=PREV PG) (GOLD5=NEXT PG)

UNRECORDED
NOV 06 1992

RECEIVED
NOV 29 1990

Dept.

INTER-DEPARTMENT MEMORANDUM

TO: Debbie Allen, Manager Fiscal Department
through Don Shaff, Manager Technical Support

FROM: Ernest Carlsen, Adjudications Supervisor

DATE: November 27, 1990

REFUND TYPE: Overpayment

Claimant's Name: Scott Carlisle

Address: Star Valley Trout Ranch
C/O Craig P. Orrock
433 S. 400 E.
Salt Lake City, UT 84111

Receipt Number: E012073

Water Right Number: A24-02038 and A24-2039

Uses Claimed: Domestic/Irrigation/Fish Propagation

Fees Submitted: \$192.00

The filing fee for the Fish Propagation Notice (A24-02038) is \$50.00, plus \$10.00 per claimed cfs (\$80.00). The fee for the Domestic/Irrigation Notice (A24-02039) is \$50.00, plus \$1.00 per irrigated acre (\$51.00 total). The total fee for both notices is \$131.00. Claimant is due a refund of \$61.00

Ernest Carlsen/Brenda Bloom 28

RECORDED
NOV 6 1990

E012073

W/R/A

E012073

INTER-DEPARTMENT MEMORANDUM

TO: Debbie Allen, Manager Fiscal Department
through Don Shaff, Manager Technical Support

FROM: Ernest Carlsen, Adjudications Supervisor

DATE: November 27, 1990

REFUND TYPE: Overpayment

Claimant's Name: Scott Carlisle

Address: Star Valley Trout Ranch
C/O Craig P. Orrock
433 S. 400 E.
Salt Lake City, UT 84111

Receipt Number: E012073

Water Right Number: A24-02038 and A24-2039

Uses Claimed: Domestic/Irrigation/Fish Propagation

Fees Submitted: \$192.00

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Ernest Carlsen/Brenda Bloom

12-2-91 Dal Froyer called and says this account has been reconciled. Of the 192.00 refunded to claimant, 131 was returned to state. 60 claims are in "p" file.

WICKIPIILLI

NOV 06 1992



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

February 16, 1990

Mr. Craig Orrock
433 South 400 East
Salt Lake City, Utah 84111

RE: Snake River Basin Adjudication
Notices of Claim to a Water Right A24-02038 and A24-02039
in the name of Scott Carlisle, Star Valley Trout Ranch

Dear Mr. Orrock:

Please find enclosed Receipt No. E012073, for Check No. 2033, for fees paid on the above referenced Notices of Claim. Also enclosed is Check No. 2034 in the amount of \$25.00. We are returning this check because it appears the fees have been overpaid and Check No. 2033 is sufficient to pay fees on both claims.

The filing fee for the fish Propagation Notice (A24-02038) is \$50.00, plus \$10.00 per claimed cfs (\$80.00 total). The fee for the Domestic/Irrigation Notice (A24-02039) is \$50.00, plus \$1.00 per irrigated acre (\$51.00 total). The total filing fee for both claims is \$131.00.

A request to refund the \$61.00 overpayment has been sent to our State Office for processing. If we have misunderstood the submission of fees, please notify this office.

Both Notices of Claim have been processed; enclosed are copies for you to retain for your files. Please review the Notices for accuracy. The period of use for irrigation (Item #6) on Notice of Claim A24-02039, was amended to reflect the standard irrigation season for that area (see instruction booklet).

MICROFILMED

NOV 6 1992

Mr. Craig Orrock
Page - 2 -

Should you determine that any items need to be changed, please make the necessary changes on this Notice of Claim, have Mr. Carlisle sign the form, having his signature notarized, and return it to this office by March 16, 1990. If there are no changes, keep the forms for your records.

Respectfully submitted,



Ernest Carlisle
Adjudications Supervisor

EC:jt

Encl:

Receipt E012073
Check No. 2034 (\$25.00)
Instruction Booklet
Request for Refund
Notices of Claim A24-02038
A24-20239

RECEIVED

NOV 6 1992

RECEIPT
For Monies Paid
to the
IDAHO DEPARTMENT OF WATER RESOURCES

Receipt No: E012073

Date: 02/16/90
Time: 09:31:56

Received
From: STAR VALLEY TROUT RANCH

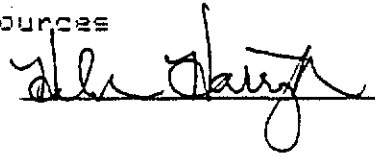
Type of Payment	Program Acct Class	Amount
ADJUDICATION FEE - SCOTT CARLISLE	0410162 9337 6490	\$131.00
OVERPAYMENT	0410162 9337 6490	\$61.00
	Total	\$192.00

CHECK 2032

WR/NO: A24-02008 A24-02039

Idaho Department of Water Resources

Region: EASTERN

Signature: 

NOV 30 1992

RECEIPT
For Monies Paid
to the
IDAHO DEPARTMENT OF WATER RESOURCES

Receipt No: E012073

Date: 02/16/90
Time: 09:31:56

Received

From: STAR VALLEY TROUT RANCH

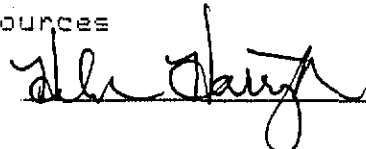
Type of Payment	Program Acct Class	Amount
ADJUDICATION FEE - SCOTT CARLISLE	0410162 9337 6490	\$131.00
OVERPAYMENT	0410162 9337 6490	\$61.00
	Total	\$192.00

CHECK 2032

WR/NO: A24-02038 A24-02039

Idaho Department of Water Resources

Region: EASTERN

Signature: 

NOV 06 1990

Water Right Number - 24-02038

Adj. Flag Translation: Standard Water Right Number

Old (D) Number - 19791

+ - - - - Last Name - - - - +

+ - First Name - - +

+ - - - - Address - - - - - +

*** C - CURRENT OWNER ***
GRASSE

JAMES E.

1 -
2 -
3 -
City- AFTON
Phone -

State- WY Zip-

+ - - Priority Date - - +
03/23/1946+ - - Region - - ~ +
15+ - - Stage - - ~ +
L - LICENSE

+ - - Status - - - - +

+ - - Source - - - - - +
SPRING CREEK+ - - Tributary - - - - - +
TYGEE CREEK+ - - Point of Diversion - - - - - +
TwN Rng Sec Tract Lot RFlg County Stream Index (Blank if no Index Code)

07S 46E 32 SE NE (29) CARIBOU 272.0 570.0 32.0 0.3 1.0 1.0 1.8

+ - - Water Use - - - - - +
Code Description Period From Period To Diversion Rate Diversion Volume

19 - FISH PROPAGATION

3.000

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Div. Capacity - + + - Total Consumptive Use - + + - KW Usage - +
3.000+ - - Place of Use - - - - - +
TwN Rng Sec Tract Lot Acres Code Description County

07S 46E 32 SE NE 19 FISH PROPAGATION (29) CARIBOU

Total Acres:

+ - - Diversion Means -

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use -

+ - - Remarks - - - - - +
No Remarks found.+ - - Conditions of Approval - - - - - +
No Conditions of Approval found.+ - - Decree Plaintiff - - - + + - - Decree Defendant - - - + + - Decree Date - +
00/00/0000

+ - - Audit Fields - 04/08/85 05/22/88 CONVERT

Water right number - 24-02038

Adj. flag translation: Standard Water Right Number

+ - - - - Water Rights Dates and Flags Area - - - - -

Proof Due Date	- 00/00/0000	Field Exam Made	- 00/00/0000	Field Exam Fee	-
Approved/Denied	- 00/00/0000	Protested Date	- 00/00/0000	Swan Falls	-
Proof Made Date	- 00/00/0000	Hearing Date	- 00/00/0000	Temporary Right	- P
Start Work Date	- 00/00/0000	Verified Date	- 04/08/1985	DLE/Carey Act	-
Order Show Cause	- 00/00/0000	Receipt Number	-	Water District	-
Licensed Date	- 12/26/1979	Appl Received	- 00/00/0000	Transfer/Amended	-
Decree Date	- 00/00/0000				

10208

1/30/1989

SRBA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME

Carlisle

CLAIM IDENT. NO.

A24-02038

DATE RECEIVED

2/15/90

CK #

AMOUNT \$

YES

NO

Required Info?

1. Is the name and address complete with zip code? ☒ YES ☐ NO *
2. Is a priority date entered?
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 ownership 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 receipted and data entered? ☒ YES ☐ NO

Claim checked by:

Rat

Date:

2/16/90

Claim must be returned to claimant:

(Yes) ☒ (No) ☐

Claimant must be notified of modifications:

(Yes) ☒ (No) ☐

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date:

Date:

Checked by:

Rat

Date:

2/16/90

Comments:

NOV 06 1992

STAR VALLEY TROUT RANCH

BOX 1266 PH. 208-225-3543
AFTON, WY 83110

2033

99-183/1023

FEB 13 1990

PAY TO THE ORDER OF IDAHO DEPARTMENT OF WATER RESOURCES \$ 192⁰⁰
ONE HUNDRED NINETY TWO & ^{XX}/₁₀₀ DOLLARS

STAR VALLEY STATE BANK
AFTON, WYOMING

FOR

Scott Goullet

02033 102301830 00 91845 8

NOV 9 1992

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