

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: A27-04119
Date Received: 6/01/1989
Receipt No: E008575
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: RAYMOND GRANT CHRISTENSEN 208-357-3243
Address: 822 N. 1100 E.
SHELLEY, ID 83274

AND

Name: LEINA S. CHRISTENSEN 208-357-3243
Address: 822 N. 1100 E.
SHELLEY, ID 83274

2. Date of Priority: MAY 08, 1899

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4	Lot	County
01S	37E	23	SE SE		BINGHAM

5. Description of diverting works:

HAND DUG WELL LINED WITH CEMENT CURB, 30" DIAMETER, 110' DEEP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		
IRRIGATION	03/15	11/15	0.180		

7. Total Quantity Appropriated is:

0.220 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 22.5 Acre Feet Per Annum.

9. Non-irrigation uses:

D/1 HOUSEHOLD

A27-04119

Page 1

Date: 08/01/89

MICROFILMED

NOV 12 1992

A2704119

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
01S	37E	23	SE SE	SE SE	DOMEST IRR	9.0
Section Acres						9.0
Total Acres						9.0

11. Place of use in counties: BINGHAM

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

13. Other Water Rights Used:
MEMBER OF IDAHO IRRIG. DISTRICT

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

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 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

A27-04119

Date Received

6-1-89

Receipt Number

E008575

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

- Raymond Grant &
1. Name of Claimant (s) LeIna S Christensen Phone (208) 357-3243
Mailing Address 822 N 1100 E Shelley, Idaho Zip 83274
2. Date of Priority (Only one (1) per claim) May 8, 1899 (Date was taken from Abstract of title)
3. Source of water supply (a) Well (Groundwater)
which is tributary to (b) _____
4. a. Location of existing point of diversion is: Township 1 S Range 37 E. B.M. Section 23,
1/4 of SE 1/4 of SE 1/4, Govt. Lot, _____ B.M., County of Bingham
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. Hand dug well lined with cement curb
thirty inch diameter- one hundred ten feet deep

MICROFILMED

NOV 12 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For domestic purposes from Jan 1 to Dec 31 amount ~~.11~~ 0.04 or _____

For Irrigation purposes from March 15 to Nov 15 amount .14 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) ~~.11~~ 0.22 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is ~~.27~~ 22.5 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Domestic use, one household

10. Description of place of use: See attached record of survey, tract # 1

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
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
1 S	37 E	23																9	9

Total number of acres irrigated Nine

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

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.
Member of Idaho Irrigation District or None ()

14. Remarks:

MICROFILMED

NOV 12 1992

Last Name Christensen Ident No. _____

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use x Posted Notice _____ License _____ Permit _____
Decree _____
If applicable provide IDWR Water Right Number 27-4119
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)

Raymond Christensen
Linda Christensen

Date 6-1-89

Date 6-1-89

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 _____

Title

of _____

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 1 day of June 19 89

SEAL

Notary Public

Betty J. Thompson

Residing at _____

My Commission Expires _____

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 _____

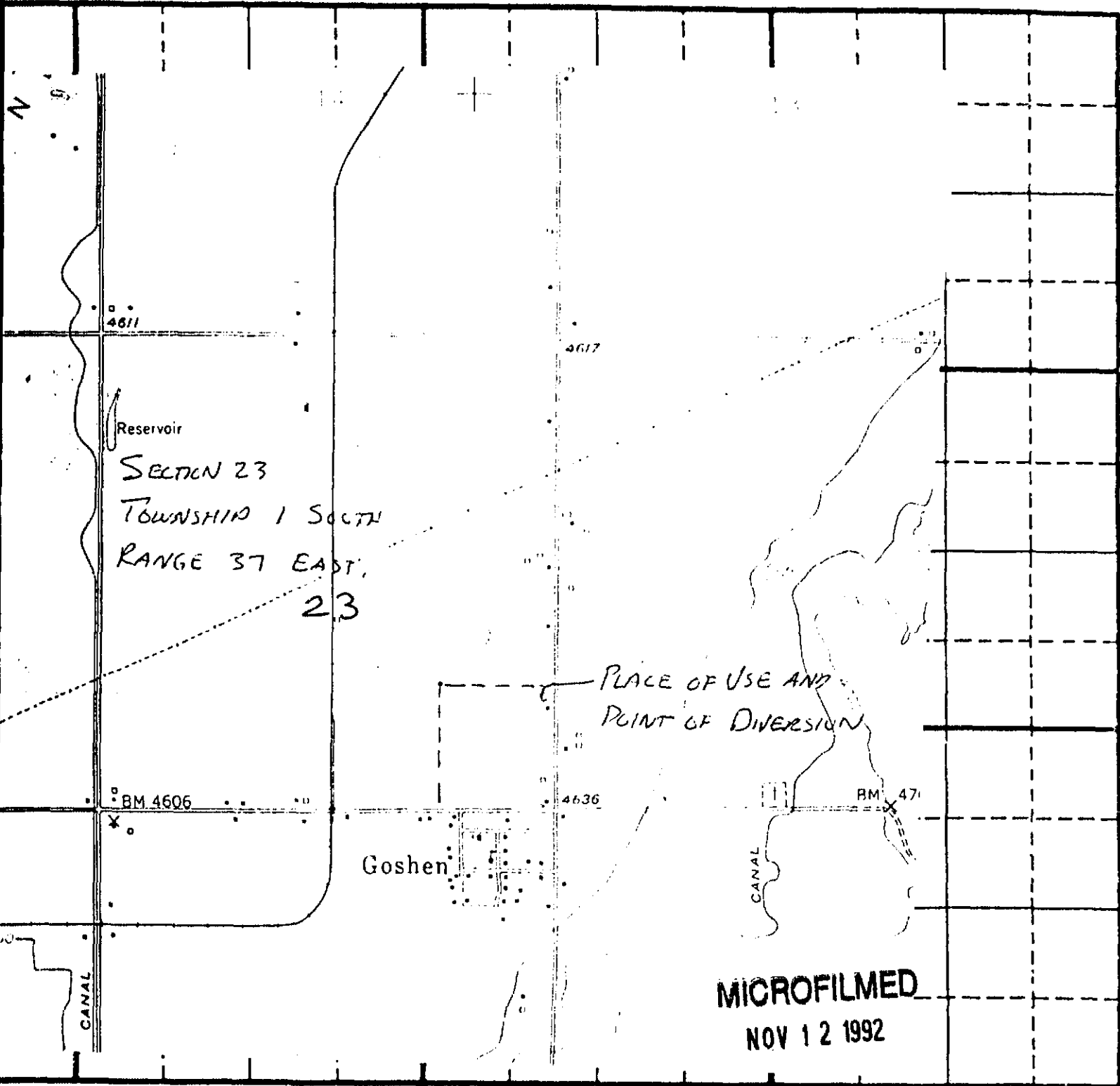
Date _____

Last Name Chriwtensen Ident. Number _____

MICROFILMED
NOV 12 1992

Copies White-State, Yellow-Claimant

submersible pump and sprinkler system were added to the stem in 1971.



how the location of the point of diversion and the place of use of the water by 40-acre subdivisions, and range of the public land survey system.

Log for claim 27-04119

Spatial Dynamics BTD

11/9/00

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
01s37e	23	SESE	9	7.9	POD placement?
Totals:			9	7.9	

AJ5809NP
No. A27-04119

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 09/29/00
PAGE: 31

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	RAYMOND GRANT CHRISTENSEN	05/08/1899	IRRIGATION	03-15 11-15	0.180 CFS	
C	LEINA S CHRISTENSEN		DOMESTIC	01-01 12-31	0.040 CFS	
	822 N 1100 E					
	SHELLEY ID 83274			TOTAL DIVERSION:	0.220 CFS	
	(208) 357-3243			CONSUMPTIVE USE:		22.50 AFA

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T01S R37E S23 SESE BINGHAM County

Place of use Legal Description for: IRRIGATION

NE				NW				SW				SE																				
NENE		NWNE		SWNE		SENE		NENW		NWNW		SWNW		SENW		NESW		NWSW		SWSW		SESW		NESE		NWSE		SWSE		SESE		
T	R	S	: Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	SUM	
---	---	---	:	---	---	---	:	---	---	---	:	---	---	---	:	---	---	---	:	---	---	---	:	---	---	---	:	---	---	---	---	---
01S	37E	23	:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:				:				:				:				:									
			:				:			</																						

ACTION OF THE DEPARTMENT OF WATER RESOURCES

This Permit is

Approved

Date

6-11-93

If approved, this permit authorizes the construction or modification of a well subject to the following conditions. READ CAREFULLY!

GENERAL CONDITIONS:

1. The well must be constructed in compliance with the applicable statutes, specific conditions of approval shown on the water right permit, injection well permit, transfer or amendment and the rules and regulations of the Department for water appropriation, injection wells and well construction standards.
2. This drilling permit is valid for two (2) months from the above approval date for the start of construction and is valid for one (1) year from the approval date for completion of the well unless an extension has been granted.
3. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare which may be required before construction of this well.
4. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
5. Approval of this drilling permit does not authorize trespass on the land of another party.
6. This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.
7. This drilling permit does not represent a right to divert and use the water of the State of Idaho.
8. If a bottom hole temperature of 85° or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.
9. If this permit is for a replacement well, the well being replaced must be abandoned in accordance with Department Rules and Regulations.

SPECIFIC CONDITIONS:

Contact IDWR prior to drilling -

Ernest Hansen for Ron Hansen
Signature of Authorized Department Representative

Eastern Regional Manager
Title

Receipt No. EX8699 Received by fg Fee 300 Date 6-11-93

EXTENSION OF DRILLING PERMIT

Extension approved by _____ Approval Date _____

This extension expires: _____

WELL DRILLER: PLEASE COMPLETE FOR VERBALS

IDWR Employee Issuing Verbal: _____

Verbal Issued Date: _____ Time: _____

State of Idaho
Department of Water Resources**APPLICATION FOR DRILLING PERMIT**

1. Applicant (please print): Raymond G. Christensen
2. Mailing Address: Rt 2, Box 219, 822 N 1100 E
City & State Shelley ID Zip Code 83274 Telephone 357-3243 after 4pm
- ☒ Well Owner ☐ Well Operator ☐ Contractor or Other, specify _____
3. Proposed Well Location: Twp. 15, Rge. 37E, Sec. 23, 5E 1/4 5E 1/4
Gov't Lot No. _____ County Bingham
Street Address of Well Site 822 N 1100 E, Shelley
Lot, block and subdivision _____

4. Proposed Use of Well:

- ☒ **DOMESTIC:** The use of water for homes, organization camps, public campgrounds, livestock (1,000 head or less) and for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC:

☒ Irrigation
☐ Stock
(Over 1,000 Head)

☐ Municipal
☐ Test

☐ Industrial
☐ Other

(Describe) _____

☐ **INJECTION**

☐ **MONITORING:** A well bore schematic and map is required for each blanket permit.
No. of proposed wells: _____

5. Well Construction Information:

A. ☒ New well ☐ Modify (Deepen or Enlarge) ☐ Replace - See Condition 9

B. Proposed Casing Diameter 8 or 10" Proposed Maximum Depth 130'

C. Anticipated bottom hole temperature:

☒ 85° F or less
(Cold Water Well)

☐ 85° F to 212° F
(Low Temp. Geo. Well)

☐ 212° F. or more
(Geothermal Well)

6. Construction Start Date: 6-25-93

7. Anticipated Well Driller: Denning
NOTE: The actual well driller must be identified prior to drilling.

8. Applicant's Signature Raymond Christensen Date June 11-1993

Title owner

(Owner, Firm Representative, Other)

4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME

Raymond Christensen

CLAIM NO.

A22-04119

DATE RECEIVED

6-1-89

CK #

AMOUNT \$

YES

NO

Required Info?

1. Is the name and address complete with zip code? ☐
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. ☐
3. (a) Is a source entered? ☐
(b) Is a tributary to entered? (if required) ☐ N/A
4. Is the legal description of the p.d. sufficient? ☐
5. Is there a description of the diverting works? ☐
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. ☐
Is the period of use included? ☐
Is a quantity claimed for each use? ☐
7. Is a total quantity claimed entered? ☐
8. If required is a consumptive use entered? ☐ N/A
Is the consumptive use correct? ☐ 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. ☐ N/A
10. Is (are) the place(s) of use and purpose(s) indicated? ☐
11. Is (are) the county(ies) entered? ☐
12. Is the ownership of p.u. checked? ☐
13. Are other water rights listed or "none" indicated? ☐
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
15. Is the basis of the claim indicated? ☐
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☐ N/A
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☐
18. Has the claim been signed, sealed, and dated by a notary? ☐
19. Was this claim filed on time, or was an extension granted? ☐
20. Is the fee enclosed correct? ☐ Exempt
21. If this claim is based on an existing water right, has the identification number been entered? ☐ N/A
22. Should this claim be data entered? ☒

Claim checked by: ESDate: 7-11-89

Claim must be returned to claimant:

(Yes) ☒ (No) ☐

Claimant must be notified of modifications:

(Yes) ☒ (No) ☐

Receipt Prepared by:

Claim data entered by: Chasak

Sent to claimant by:

Date:

Date: Aug 1, 1989

Checked by:

Date:

Comments:

MICROFILMED

NOV 12 1992