

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: 39 76

Ident. Number: A29-07668
Date Received: 5/17/1990
Receipt No: E01349
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: VILLABROS ENTERPRISES 208-237-4711
Address: P.O. BOX 429
POCATELLO, ID 83204

2. Date of Priority: NOV 03, 1982

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06S	34E	22	NW	NW			BANNOCK

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
COMMERCIAL	01/01	12/31	0.020		10.10

7. Total Quantity Appropriated is:
0.020 C.F.S. (and/or) 10.10 A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
C/ BUSINESS

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06S	34E	22	NW	NW		COMMER	

11. Place of use in counties: BANNOCK

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 _____

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 A29-07668
Date Received 4-17-90
Receipt Number E013492

#001231 \$ 25.00 of 30.00
5.00 Overpayment

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

APR 17 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Villa Bros Enterprises, Inc Phone (208) 237-4711
Mailing Address P.O. Box 429 Pocatello, ID Zip 83204

2. Date of Priority (Only one (1) per claim) Nov. 3, 1982

3. Source of water supply (a) Groundwater
which is tributary to (b) _____

4. a. Location of existing point of diversion is: Township 6S Range 34E Section 22,
_____ 1/4 of NW 1/4 of NW 1/4, Govt. Lot, _____ B.M., County of Bannock

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 _____

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 & Pump to a commercial
building - use is less than 2500 gallons per day.

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NOV 13 1992

A2907668



6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Domestic purposes from 1-1 to 12-31 amount 0.02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.02 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ 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 classification for business using less than 2500 gpd.

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	
6S	34E	22					D												

Total number of acres irrigated _____

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

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

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

Decree _____

If applicable provide IDWR Water Right Number 29-7668

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 ☒ 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) _____ Date _____

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am President

Title

of Villabros Enterprises, Inc., that I have signed the foregoing

Organization

document in the space below as President of Villabros Enterprises, Inc.

Title

Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent

Paul J. Villabros

Title and Organization President, Villabros Enterprises, Inc. Date 16 April 1990

State of Idaho/or _____)
County of Bannock) SS.

Subscribed and sworn (or affirmed) before me this 16th day of April 19 90

SEAL

Notary Public

Bekki Meador

Residing at

Pocatello Idaho

My Commission Expires

9-27-91

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 _____

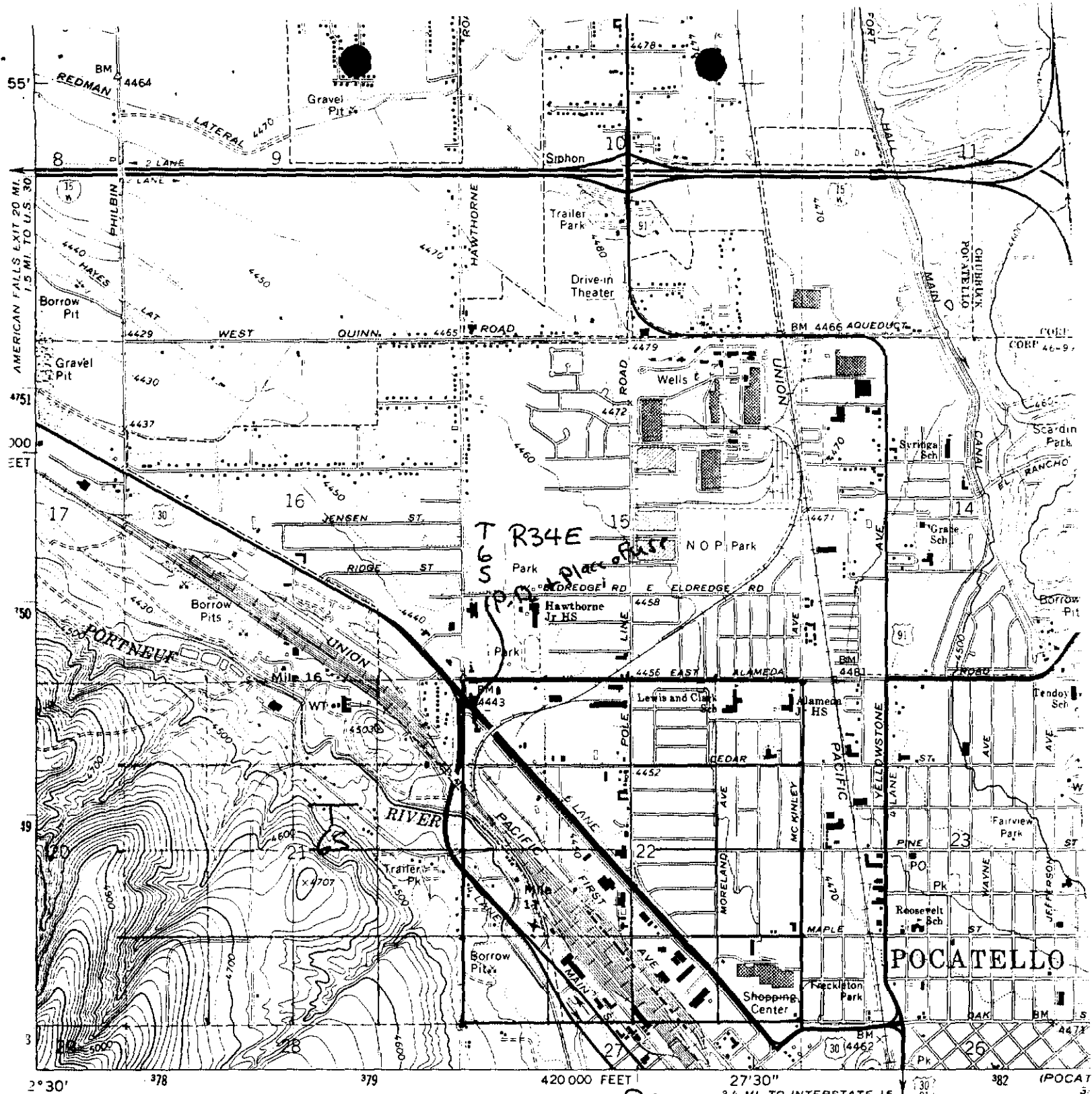
Date _____

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Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant



Mapped, edited, and published by the Geological Survey

Control by USGS and USC&GS

Topography by photogrammetric methods from aerial photographs taken 1969. Field checked 1971

Projection and 10,000-foot grid ticks: Idaho coordinate system, east zone (transverse Mercator)

1000-meter Universal Transverse Mercator grid ticks, zone 12, shown in blue. 1927 North American datum

Red tint indicates areas in which only landmark buildings are shown

Fine red dashed lines indicate selected fence lines

UTM GRID AND 1971 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET

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CONTOUR IN
DOTTED LINES REPRESENTS
DATUM IS :

NOV 12 1992
THIS MAP COMPLETES WITH NA
FOR SALE BY U.S. GEOLOGICAL SURVEY, DEN
A FOLDER DESCRIBING TOPOGRAPHIC M.

WHITE - State Auditor
 YELLOW - Remittance Advice
 PINK - State Auditor then Agency
 GOLDENROD - Agency Copy

EXPENDITURE VOUCHER

AUDITOR USE

STATE OF IDAHO
 Office of State Auditor

AGENCY USE

8968
Date
05/01/90
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

VILLABROS ENTERPRISES, INC.
 PO BOX 429
 POCA TELLO, ID 83204

CHECK ONE:

(1) MISCELLANEOUS EXPENDITURE

() STATE CONTRACT

() PURCHASE ORDER

() MISCELLANEOUS ENCUMBRANCE REQUISITION

Encumbrance Reference No.

PAYMENT: () PARTIAL () FINAL

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	04 10 162	7337	8831		REFUNDS PER ERNEST CARLSEN RECEIPT #E013492 4/24/90 5.00 A29-07668	5.00	
TOTAL						5.00	

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.

Date

Head of Agency or Institution

State Auditor

E013492
 Serial

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NOV 13 1992

From: DWR70::THOMPSON
To: DWR03::SHAFF
CC:
Subj: RE: A29-07668

26-APR-1990 08:36:00.45

DON,

ITEM #6

FOR: DOMESTIC.....PURPOSES FROM: 01/01 TO 12/31; AMOUNT 0.02CFS

ITEM #9

DOMESTIC CLASSIFICATION FOR BUSINESS USING LESS THAN 2500 GPD.

SORRY, I DID NOT GIVE YOU THE INFO YOU WANTED. HOPE THIS HELPS.

JO

MICROFILMED
NOV 13 1992

From: DWR03::SHAFF 25-APR-1990 14:46:26.36
To: DWR70::CARLSEN,DWR70::THOMPSON
CC: SHAFF
Subj: A29-07668

On the refund request (Rec't E013492) to Villabros Enterprises,
does the claim actually say domestic or will it be filed with
commercial as the use? What the claim actually states will
dictate the amount of the fee.

A29-07668

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NOV 13 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

April 24, 1990

Gate City Distributing, Co.
Villabros Enterprises, Inc.
Attn: Paul Villabros
P.O. Box 429
Pocatello, ID 83204

RE: Overpayment

Dear Mr. Villabros:

The Notice of Claim for your domestic/commercial well and Check #001231 for \$30.00 have been received by the Department. The Notice has been assigned A29-07668 and Receipt E013492 issued to record payment of the filing.

A review of the Notice revealed the use as Domestic (use less than 2500 gallons per day). Consequently, reducing the filing fee from \$30.00 to \$25.00. A \$5.00 overpayment is, therefore, shown on the receipt.

Steps to refund this money have already been initiated. You should receive it shortly after the first of May.

Respectfully submitted,

Ernest Carlsen
Adjudications Supervisor

EC:bb-

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State of Idaho

DEPARTMENT OF WATER RESOURCES

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

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Adjudications Supervisor

EC:bb

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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

INTERDEPARTMENT MEMORANDUM

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

FROM: Ernest Carlsen, Adjudications Supervisor

DATE: April 24, 1990

REFUND TYPE: Overpayment

Claimant's Name: Villabros Enterprises, Inc.

Address: P.O. Box 429
Pocatello, ID 83204

Receipt Number: E013492

Water Right Number: A29-07668

Uses Claimed: Domestic/Commercial

Fees Submitted: \$30.00

Uses as described on Notice of Claim A29-07668 indicate the use to be for commercial building - use is less than 2500 gallons per day. Appropriate use should be indicated as Domestic rather than Commercial. Claimant, therefore, is due a refund of \$5.00, and claim A29-07668 will be filed as Domestic at \$25.00.

Ernest Carlsen/Brenda Bloom

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RECEIPT
For Monies Paid
to the
IDAHO DEPARTMENT OF WATER RESOURCES

Receipt No: E013492

Date: 04/23/90
Time: 13:03:06

Received

From: GATE CITY DISTRIBUTING CO

Type of Payment	Program Acct Class	Amount
ADJUDICATION FEE	0410162 9337 6490	\$25.00
OVERPAYMENT	0410162 9337 6490	\$5.00

Total

\$30.00

CHECK 001231

WR/NO: A29-07668

Idaho Department of Water Resources

Region: EASTERN

Signature: *Blair*

GATE CITY DISTRIBUTING, CO.

3034 GARRETT WAY

P.O. BOX 429

POCATELLO, ID 83204

PH. (208) 237-4711

KEY BANK OF IDAHO
POCATELLO, IDAHO 83204

92-155/1241

CHECK NO. 001231

CHECK DATE	AMOUNT
4/6/90	30.00

REGISTERED
R 8N116000 30 DOLS 00 CTS

PAY
TO THE
ORDER
OF

Idaho Department of
Water Resources

GATE CITY DISTRIBUTING, CO.

Paul J. Villano
AUTHORIZED SIGNATURE

⑈001231⑈ ⑆124101555⑆00 116087 8⑈

NOV 13 1994
MICROFILME



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

March 26, 1990

Gate City Distributing Co.
P.O. Box 429
Pocatello, ID 83204

RE: Notice of Claim

Dear Mr. Villaro:

The Idaho Department of Water Resources (IDWR) is returning your Notice of Claim to a Water Right, along with your check (#001205 in the amount of \$25.00), because of insufficient information and fees. All items on the form must be completed before the IDWR can process the notice.

Please correct the items identified below on the new form (enclosed), and return the notice and filing fee to the IDWR by May 1, 1990. If the corrected notice is not returned by then, it will be subject to an additional late fee.

The date of priority must be entered in Item #2. This is the month, day, and year water was first put to beneficial use. If you do not know the precise date, you must estimate the month, day, and year.

A description of the diversion works must be entered in Item #5, for example, well/pump, springbox, or headgate/ditch. Include the dimensions such as depth, casing size, pump horsepower, etc., if known.

As a suggestion for Item #6, IDWR has traditionally described the culinary use of water in conjunction with a business as commercial use. Though the diversion rate likely can not be measured, if the use consists of lavatory facilities and/or a break area then a flow rate of 0.04 cfs is probably sufficient.

The total amount claimed (cfs) must be entered in Item #7. This total amount is usually the sum of the amounts listed in Item #6. If only one purpose is claimed in Item #6, the amount would be the same in Item #7.

The location of the place of use must be described in Item #10. The description must include a Township, Range, Section, and 1/4 of 1/4 Section (40-acre tract). Base on the description for the point of diversion, the corresponding 1/4

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1/4 has been highlighted.

Claims by corporations, municipalities, and other organizations must be signed by an officer of the corporation, an elected official of the municipality, or an individual authorized by the organization to sign the form. The "For Organizations" block in Item #16 must be completed with the signator's title and must be notarized.

Under the present statute water used for culinary purposes in a business does not qualify for the \$25.00 filing fee. The fee for this notice is \$50.00 plus \$100.00/cfs claimed. The total would \$54.00 provided you claimed 0.04 cfs.

It may be important for you to know that water uses developed from a groundwater source after March 25, 1963, for any use other than residential domestic or stock water use, must be filed on with an application for permit rather than a notice of claim. In the event the well was first used after the above date, an application for permit with instructions is enclosed for your convenience.

If you wish to make an appointment to discuss this matter, please call the IDWR at (208) 525-7161.

Respectfully submitted,



Ernest Carlsen
Adjudication Supervisor

EC:jt

Enclosure

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NOV 13 1992

GATE CITY DISTRIBUTING, CO.

3034 GARRETT WAY
P.O. BOX 429
POCATELLO, ID 83204
PH. (208) 237-4711

KEY BANK OF IDAHO
POCATELLO, IDAHO 83204

92-155/1241

CHECK NO. 001205

CHECK DATE	AMOUNT
3/21/90	\$ 25.00

REGISTERED
R 8N116000 25 DOLS 00 CTS

GATE CITY DISTRIBUTING, CO.

Paul J. Villars
AUTHORIZED SIGNATURE

NOV 13 1989
MICROFILMED
PAY TO THE ORDER OF

Idaho Department of
Water Resources

⑈001205⑈ ⑆124101555⑆00 116087 8⑈