

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: A47-07478
Date Received: 1/27/1989
Receipt No: S004632
Received By: W

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: COLLEGE OF SOUTHERN IDAHO 208-733-9554
Address: P.O. BOX 1238
TWIN FALLS, ID 83303

2. Date of Priority: AUG 11, 1978

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	17E	4	NE	SW			TWIN FALLS
			SE	SW			TWIN FALLS

5. Description of diverting works:
2220'X12" & 1480'X12" WELLS, 10" PIPE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
HEATING	01/01	12/31	1.210		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
G/CAMPUS BLDG

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	17E	4	NE	SW		HEAT	
			SW	SW		HEAT	

A47-07478

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Date: 01/27/89

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MAR 11 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	17E	4	SE	SW	HEAT	
			NW	SE	HEAT	

11. Place of use in counties: TWIN FALLS

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

13. Other Water Rights Used:
47-7606 PERMIT

14. Remarks:

15. Basis of Claim: PERMIT

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 _____

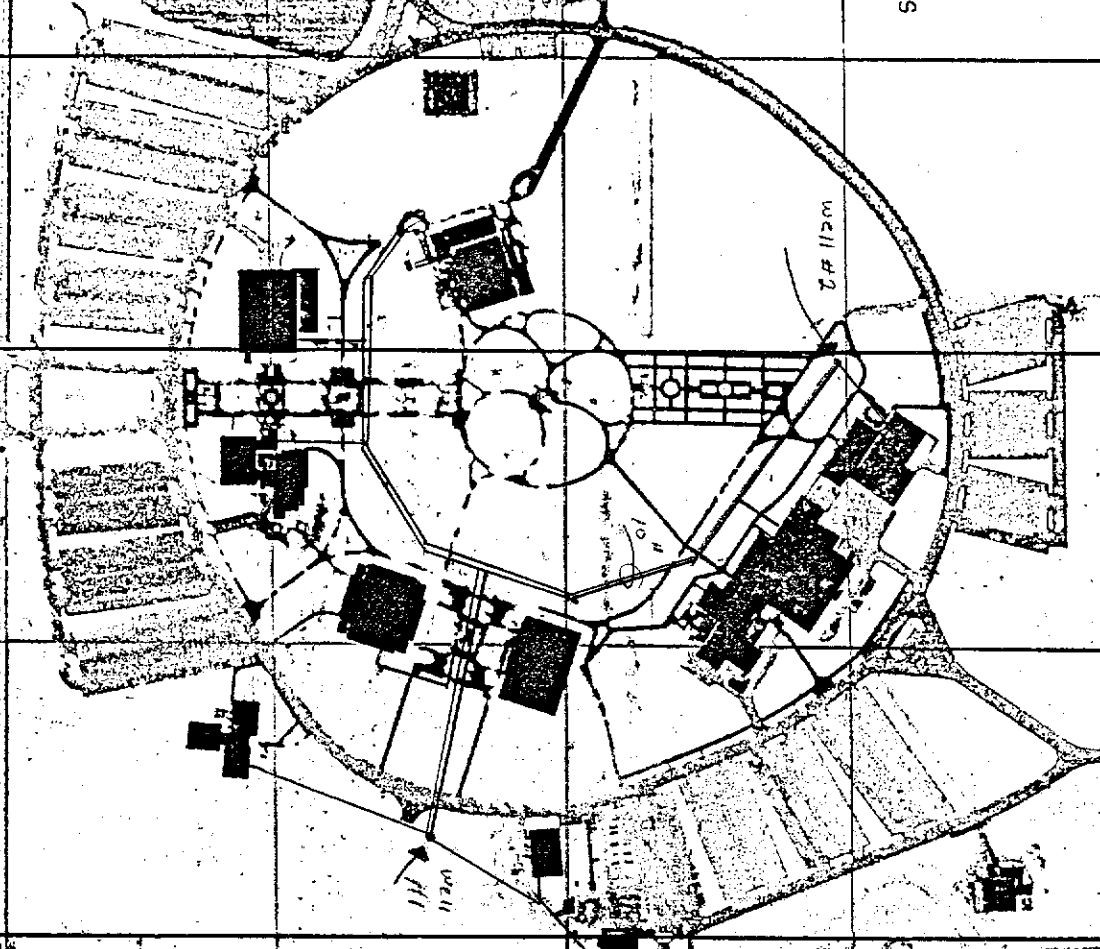
Notary Public

Seal

Residing at _____

My Commission Expires _____

THIS SQUARE IS
NW 1/4 of
NW 1/4 of
SW 1/4
Section 4
Township 10 S
Range 17 E



College of
Southern ID
PERMIT
47-7478

1/22/1988

SRBA CLAIMS RECEIVING CHECKLIST

373

CLAIMANT'S NAME

CSI

CLAIM IDENT. NO.

447-07478

DATE RECEIVED

12/16/88

CK #

8365

AMOUNT \$

221

YES

NO

1. Is the name and address complete with zip code?

YES

NO

2. Is a priority date entered?

YES

NO

Is the water use exempt from the Permit requirements, or if it is not exempt, has a Permit been approved or a License issued?

A Permit is required: (1) for groundwater developed after March 25, 1963 (except single family domestic and stockwater wells using less than 13,000 gpd), or (2) for surface water developed after May 20, 1971 (except for instream stockwater). USE CARE IF CLAIM IS RETURNED. REFER TO ADJUDICATION MEMOS # 1 (ADJ. CLAIMS/APPLICATIONS) AND # 9 (REJECTION OF CLAIMS). EXPLAIN IN COMMENTS.

3. (a) Is a source entered?

YES

NO

(b) Is a tributary to entered? (if required)

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?

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, each household must file a separate claim. See Adjudication Memo # 4.

YES

NO

10. Is (are) the place(s) of use entered?

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" checked?

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.)

N/A

15. Is the basis of the claim checked?

YES

NO

16. Is the claim signed by the claimant, and is the signature appropriate? (If an individual is the claimant, has that individual signed the claim, or if an organization is the claimant, is the organization signature block complete?)

YES

NO

Has the claim been signed, sealed, and dated by a notary?

YES

NO

Is the fee enclosed correct?

YES

NO

If this claim is based on an existing water right, has the identification number been entered?

N/A

Should this claim be receipted and data entered?

YES

NO

Claim checked by:

SCC

Comments:

WR# 47-7478

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MAR 11 1989

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 A47-07478
Date Received _____
Receipt Number 5004632 *see*

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

DEC 16 1993

Department of Water Resources
Southern Region: Office

Please type or print clearly

1. Name of Claimant (s) College of Southern Idaho Phone (208) 733-9554

Mailing Address P.O. Box 1238, Twin Falls, Idaho Zip 83303-1238

2. Date of Priority (Only one (1) per claim) August 11, 1978

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

4. a. Location of existing point of diversion is: Township 10S Range 17E Section 4,
SE 1/4 of SW 1/4 ~~XXXXXXX~~, Govt. Lot, _____ B.M., County of Twin Falls

Additional points of diversion if any: NE 1/4 of SW 1/4, Section 4, Township 10S Range 17E

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. Two wells drilled with artesian flow
Well #1 12" diameter casing - 2220 feet deep
Well #2 12" diameter casing - 1480 feet deep
10" pipe interconnecting the two wells and 10" distribution pipe around the campus. Pipe
sizes are reduced at building site according to needs. Automatic flow restricting devices
are installed in each heating system.

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MAR 11 1994

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Heating purposes from Jan. 1 to Dec. 31 amount 1.21 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1.21 (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.) Heating for campus building

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	
10S	17E	4									G		G	G		G			

Total number of acres irrigated _____

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

12. Do you own the property listed above as place of use? Yes _____ No X

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.

Permit 47-7606 (January 24, 1980) _____ or None ()

14. Remarks: Authority: President, College of Southern Idaho

Attachments: Map showing two wells and pipe distribution system

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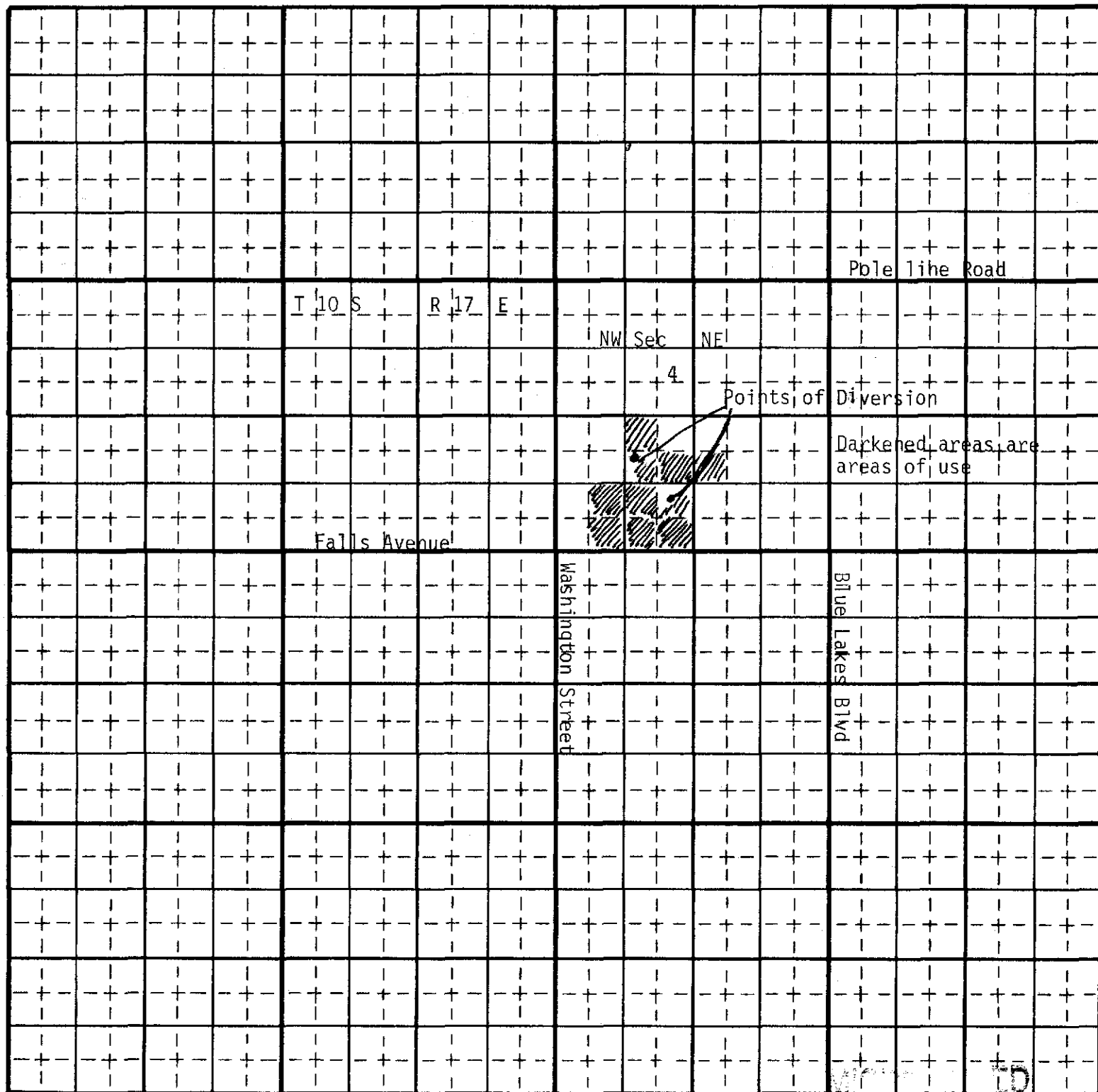
MAR 11 1983

Last Name College of Southern Idaho Ident No. Permit 47-7478

Copies: White -State, Yellow-Claimant

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

Scale: 2 inches equals 1 mile



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MAR 11 1993

Last Name College of Southern Idaho Ident No. _____

Copies: White-State, Yellow-Claimant

Basis of Claim (check one) Beneficial Use X Posted Notice _____ License _____ Permit 47-7478
Decree _____ Submitted proof of Beneficial use
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 X do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 1

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) N/A Date _____

Date _____

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

of College of Southern Idaho, that I have signed the foregoing

document in the space below as President of College of Southern Idaho

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

Signature of Authorized Agent

Title and Organization President, College of Southern Idaho Date December 12, 1988

State of Idaho/or _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 12 day of December 19 88

SEAL

Notary Public

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 _____

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MAR 11 1993

Last Name College of Southern Idaho Ident. Number Permit 47-7478
Idaho

Copies White-State, Yellow-Claimant

6/9/94

COMMUNICATION DOCUMENTATION

This form is to be used to document public record information requests regarding any SRBA claim or claims. The form may also be used to document IDWR communications requesting information regarding any SRBA claim or claims when the request is not made in writing or the claim verification report is not readily available to document the request. This form is to be filed in all relevant claim files or a central office file.

IDWR Employee/Agent JEANIE M ROBERTSON

DATE

CUSTOMER

February 20, 1996 3:21pm CRYSTAL (ROSHALT'S OFFICE)
A47-07478, A47-12415, A47-12416

SUBJECT: WHO FILED CLAIMS???

phone call (X) walk-in (.)

She wanted to know who filed these claims? Told her they were filed by Gerald Meyerhoffer, the President of the College...

NOV 28 1996