

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: A47-07935
Date Received: 1/20/1989
Receipt No: S006129
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CYNTHIA G. KOFFER 208-734-3054
Address: 1068 WIRSCHING AVE. WEST
TWIN FALLS, ID 83301
AND
Name: MARK S. KOFFER 208-734-3054
Address: 1068 WIRSCHING AVE. WEST
TWIN FALLS, ID 83301
2. Date of Priority: MAY 08, 1977
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:
- | Township | Range | Section | 1/4 of | 1/4 of | 1/4 of | Lot | County |
|----------|-------|---------|--------|--------|--------|-----|------------|
| 10S | 17E | 7 | SW | | NE | | TWIN FALLS |
5. Description of diverting works:
6"X 115" WELL, 1 HP PUMP.
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 | | |
7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) A.F.A.
8. Total consumptive use is Acre Feet Per Annum.
9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	17E	7	SW NE		DOMEST	

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:
NONE

14. Remarks:

DWR NOTE: ORIGINAL LICENSE INCLUDED HEATING AND IRRIGATION USES
WITH TOTAL DIVERSION OF .08 CFS. THESE USES WERE NOT CLAIMED.
PRIORITY DATE ON LICENSE WAS 06-29-1983, NOT THAT SHOWN ON CLAIM.

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 _____

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

Identification No. 447-07935

Date Received _____

Receipt Number 5006129

RECEIVED **NOTICE OF CLAIM**
TO A
WATER RIGHT

DEC - 9 1988

Department of Water Resources
Southern Region Office

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Mark S. & Cynthia G. Koffer Phone (208) 734-3054

Mailing Address 1068 Wirsching Avenue West Twin Falls, ID Zip 83301

2. Date of Priority (Only one per claim) May 8, 1977 Month/Day/Year

3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 10 S Range 17 E

Section 7, SW 1/4 of NE 1/4 of _____ 1/4, Govt. Lot _____, BM.,

County of Twin Falls

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate 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. 6 inch well, 115 feet deep, 1 HP pump and pipeline

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For Domestic purposes from Jan 1 ^{Month/Day} to Dec. 31 ^{Month/Day} amount .04 ^(cfs)

(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .04 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) one household

MICROFILMED

MAR 11 1993

10. Place of use is: Township: 10 S Range 17 E

Section 7, SW 1/4 of NE 1/4, Govt. Lot _____, B.M.,

County of Twin Falls for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

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 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.

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number 47-7935

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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) Mark S. Walker Date 12/8/88

Cynthia J. Walker Date 12/8/88

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

of _____, Title _____, that I have signed the foregoing

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 _____ Date _____

Title and Organization _____

State of Idaho/or _____ } SS.

County of _____ }

Subscribed and sworn (or affirmed) before me this 8th day of December 19 88

SEAL

Notary Public Helen B. Walker

Residing at Twin Falls, Idaho

My Commission Expires 8-11-94

Last Name WALKER Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 11 1993

9/22/1988.

SRBA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME

Mark Koffer

CLAIM IDENT. NO.

A47-07935

DATE RECEIVED

12-9-88

CK #

6792

AMOUNT \$

25.00

YES

NO

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

✓

—

2. Is a priority date entered?

✓

—

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?

✓

—

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

✓

—

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

✓

—

11. Is (are) the county(ies) entered?

✓

—

12. Is the ownership of p.u. checked?

✓

—

13. Are other water rights listed or "none" checked?

✓

—

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?

✓

—

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?)

✓

—

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

✓

—

Is the fee enclosed correct?

✓

—

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?

✓

—

Claim checked by:

Ses
MICROFILMED

Comments:

Permit # 47-07935

MAR 11 1993

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOUR
RECOMMENDED WATER RIGHTS ACQUIRED UNDER ST

RIGHT NUMBER: 47-07935

NAME & ADDRESS: CYNTHIA G KOFFER
MARK S KOFFER
1068 WIRSCHING AVE W
TWIN FALLS ID 83301

SOURCE: GROUNDWATER

QUANTITY:

0.04

CFS

VOL 2.0

PRIORITY DATE:

05/08/1977 6/29/83

POINT OF DIVERSION:

T10S R17E S07

SWNE

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
DOMESTIC DOMESTIC, 1 HOME

01 m 4/1 - 10/31
02

PLACE OF USE:

DOMESTIC
T10S R17E S07

Within TWIN FALLS Cou
SWNE 0.54C

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WA

Return flow if discharged to a subsurface syste
authorized by a separate injection well permit,
if discharged to a surface water system shall m
Quality Standards.

PARCEL NO. RPT07410010030

PROPERTY ALSO KNOWN AS LOT 3, BLOCK 1, TWIN FAL

EXPLANATORY MATERIAL: BASIS OF CLAIM - PERMIT

on there

26
09C
16

n 11
n 13

Water Right Number - 47-07935

Prefix Translation: WATER RIGHT

Old (D) Number -

+ + + + +	Last Name - - - +	+ - First Name - +	+ - - - - Address
-----------	-------------------	--------------------	-------------------

*** C - CURRENT OWNER ***
KOFFER

CYNTHIA G

1 - 1068 WIRSCHING AVE W

2

15

City- Twin Falls

phone - 208-734-3054

State- ID Zip- 83301

MARK S

1 - 1068 WIRSCHING AVE W

2

1

City- Twin Falls

phone - 208-734-3054

State ID Zip- 83301

+ - - Priority Date	- - +	+ - - Region	- - - +	+ - - Stage	- - - +	+ - - Status
		17 SOUTHERN		L - LICENSE		
	06/29/1983					

+ + + + +	Source +
+ + + + +	Tributary - - - - - +

GROUNDWATER

Town	Rng	Sec	Tract	Lot	Rflg	County	Point of Diversion	Diversion Name	Diversion Rate	Diversion No.
------	-----	-----	-------	-----	------	--------	--------------------	----------------	----------------	---------------

Twn	Rng	Sec	Tract	Lot	RFlg	County	Diversion Name	Diversion Rate	Diversion No.
10S	17E	7	SW NE			(83)	TWIN FALLS		

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

	01 - IRRIGATION	04/01	10/31	0.020	2.00
+ - Total Div. Rate - +	+ - Total Div. Volume - +	+ - Total Div. Capacity - +	+ - Total Consumptive Use - +	+ - KW Usage - +	
0.020	2.00	0.040	0.0	0.0	

Twn	Rng	Sec	Tract	Lot	Acres	Place of Use Code	Description	County
10S	17E	7	SW NE		0.5	01	IRRIGATION	(83) TWIN FALLS
Total Acres:					0.5			

+ - - Diversion Means -

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use -

	Remarks
	This right when combined with all other rights shall provide no more than 0.02 cfs nor exceed a combined annual diversion volume of 2.0 af for the lands above.

WP5808NP
(00-26)

IDAHO DEPARTMENT OF WATER RESOURCES
WATER RIGHT PROOF READING REPORT

08/03/98 14:52:28
Page 2

Water right number - 47-07935

Prefix Translation: WATER RIGHT

+ - - - - Old Water Right Numbers - - - - - +

+ - - - - Old Water Right Numbers - - - - - +
No Old Water Right Numbers found.

+ - - - - Conditions of Approval - - - - - +
No Conditions of Approval found.

+ - - - - Decree Plaintiff - - - + - - - Decree Defendant - - - + - - - Decree Date - - - +
00/00/0000

+ - - - - -Comments- - - - - +
No Comments Found

+ - - Audit Fields - 09/22/87 05/28/88 CONVERT 03/11/91 BILBAO 04/16/91 BILBAO 07/18/95 ABATES
07/25/95 ABATES 05/28/96 CZIMMER

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

Proof Due Date	- 04/01/1991	Field Exam Made	- 07/10/1995	Field Exam Fee	- N
Approved/Denied	- 04/02/1986	Protested Date	- 00/00/0000	Swan Falls	- Z
Proof Made Date	- 02/05/1991	Hearing Date	- 00/00/0000	Temporary Right	- P
Exam to S.O. Date	- 07/19/1995	Verified Date	- 04/10/1986	DLE/Carey Act	-
Order Show Cause	- 00/00/0000	Receipt Number	-	Water District	-
Licensed Date	- 05/31/1996	Appl Received	- 06/29/1983	Transfer/Amended	-
Presumption Flag	-	Name Connector	- AND	POU Ownership Flag	- Y
SRBA Decreed Flag	-				

OLD (D) NUMBER -

+ - - - - ADDRESS - - - - - +

1 - 1068 WIRSCHING AVE. WEST

CITY- TWIN FALLS

STATE- ID ZIP- 83301

PHONE - 208-734-3054

1 - 1068 WIRSCHING AVE. WEST

3 -

CITY- TWIN FALLS

STATE- ID ZIP- 83301

PHONE - 208-734-3054

+ - - - STAGE - - - +
P - PERMIT

+ - - - STATUS - - - - +

+ - - - - - TRIBUTARY - - - - - +

----- OLD WATER RIGHT NUMBERS -----
NO OLD WATER RIGHT NUMBERS FOUND.

WATER RIGHT NUMBER - A47-07935

PREFIX TRANSLATION: ADJUDICATION CLAIM

----- CONDITIONS OF APPROVAL -----
09C - RETURN FLOW IF DISCHARGED TO A SUBSURFACE SYSTEM MUST BE
- AUTHORIZED BY A SEPARATE INJECTION WELL PERMIT, AND RETURN FLOW
- IF DISCHARGED TO A SURFACE WATER SYSTEM SHALL MEET IDAHO WATER
- QUALITY STANDARDS.

----- DECREE PLAINTIFF -----

----- DECREE DEFENDANT -----

----- DECREE DATE -----
00/00/0000

----- AUDIT FIELDS - 01/20/89 CLELLAND 10/17/89 REFUNDML -----

----- COMMENTS -----
NO COMMENTS FOUND

----- ADJUDICATION RIGHTS DATES AND FLAGS AREA -----

COURT REPORT FILING	- 00/00/0000	FIELD INSPECTION MADE	- 00/00/0000	CIVIL CASE NUMBER	- 39576
OBJECTION FILED DATE	- 00/00/0000	FIELD INSPECTION FLAG	-	OLD CASE NUMBER	-
RESPONSE FILED DATE	- 00/00/0000	VERIFIED DATE	- 04/10/1986	OLD JUDICIAL DISTRICT	-
CLAIM RECEIVED DATE	- 01/20/1989	LAST AMENDED DATE	- 00/00/0000	TEMPORARY RIGHT	- P
PROOF DUE DATE	- 00/00/0000	PROOF MADE DATE	- 00/00/0000	WATER DISTRICT	-
LICENSED DATE	- 00/00/0000	RECEIPT NUMBER	- S006129	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	- AND	NOTICE OF ERROR FLAG	-

RP T07410010030
Lot 3 B1K1 T.F. Carlin Sub

PROOF
NOV 0 / 1991

DATA ENTRY

ENTERED 3-23-94
CHECKED 4-21-94

Verified By
Topo Map/Ortho-PQ
Aerial Map
Watermaster Records
NAPP Photos
Field Exam
Other (See Remarks)
County Records
Witness Statement
Project Records
IDWR Records

VERIFIED
JAN 24 1992

CERTIFIED
JAN 26 1992
WATER EXAMINER

6/9/94

COMMUNICATION DOCUMENTATION

Claim No. A47-07935

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 Steve Clelland

May 28, 1996 10:24am

NAME:
CINDY ZIMMERMAN IDWR

RE:
47-07935

SHE HAD SOME QUESTIONS ON THE RECOMMENDATIONS FOR THE SRBA CLAIM PREPARED BY DUNN AS COMPARED TO THE FINAL, UPCOMING LICENSE. SHE IS GOING TO LICENSE THE RIGHT FOR IRRIGATION ONLY AND NOT DOMESTIC... I TOLD HER TO GO AHEAD SINCE WE CAN REVISE THE R-RECORDS IN THE SRBA UP UNTIL THE DIRECTOR'S REPT. CHANGE TO THE SRBA RIGHT WILL BE UPDATED TO MATCH THE LICENSE.

NOV 28 1996