

FAX

August 18, 2003

TO: IDWR Document Depository
Chief, Natural Resource Division
Gloria Bainbridge, CACI- Boise

FROM: Fred Price, BLM-ISO

RE: SF-4, Late Notice of Claim
57-11627, Randall & Chris Andersen

Subcase
57-11627

Claimant
Randall & Chris Andersen

We received an SF-4, Late Notice of Claim, where no Notice of claim was attached to the SF-4. I was able to obtain a copy from the Clerk of the SRBA Court.
I'm faxing you a copy incase you didn't receive a Notice of Claim either.

AUG-18-03 MON 02:04 PM SRBA DIST COURT

FAX NO. 12087362121

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Form No. 42-1009 (2) 1/6/89

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 57-11627

Date Received

Receipt Number

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day.

RECEIVED

MAY - 7 2003

Department of Water Resources

Filing Fee \$25

Please type or print clearly

1. Name of Claimant(s) Randall & Chns Andersen Phone (208) 989-8530 CA
4299 Pershall Rd 896-6030
 Mailing Address Rural Route 313 Pershall Rd. ID, Zip 83639
 2. Date of Priority (Only one per claim) October 5, 1998 (Date moved into home)
 3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
 which is tributary to (b) _____ Name or kind of source

1. Location of point of diversion is: Township 2 North Range 5 West
 Section 11 W 1/2 of NE 1/4 of NE 1/4, Govt Lot _____, CM _____
 County of Owyhee

Additional points of diversion if any: N/A

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the date of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well: 324 foot Domestic Well w/ 1 1/2 HP pump
50 GPM Well

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

For Domestic purposes from 1-1 to 12-31 amount 0.04 (cfs)
 (Both dates are inclusive)
 For stockwater purposes from 1-1 to 12-31 amount 0.02

7. Total quantity claimed 0.06 (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 / 2 horses
Domestic stockwater

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10. Place of use is Township 2 North Range 5 West
 Section 11 W 1/2, NE 1/4 of NE 1/4, Govt. Lot _____ B.M.

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? Owyhee County

12. Do you own the property listed above as place of use? Yes ☒ 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
 () None or N/A

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 _____

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 _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments 2

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

Signature of Claimant (s) Randall P. Anderson Date 5-6-03
Q. Anderson Date 5-6-03

For Organization(s): I do solemnly swear or affirm that I am _____

of _____ Title _____
 Organization _____ 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 _____)

County of _____) ss. **NOTARIZATION REQUIRED FOR EACH CLAIM**

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 2003

LINDA E. NOYCE
 STATE OF IDAHO
 NOTARY — PUBLIC

Notary Public Linda E. Noyce
 Residing at Marsing Idaho
 My Commission Expires 9-21-2004

Last Name _____ Agent No _____

Copies: White-State, Yellow-Cleanant