

06/09/2004

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 23-10207

NAME AND ADDRESS: BONNIE JACKSON
PO BOX 104
IRWIN ID 83428

ROBERT J JACKSON
PO BOX 104
IRWIN ID 83428

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS
0.600 AFY

PRIORITY DATE: 05/01/1950

POINT OF DIVERSION:

T01N R44E S21 NENWSW Within BONNEVILLE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

COMMERCIAL

01/01 12/31

0.040 CFS

0.60 AFY

COMMERCIAL; RESTAURANT AND BAR

PLACE OF USE: COMMERCIAL Within BONNEVILLE County

T01N R44E S21 NWSW

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL: Beneficial Use

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: A23-10207
Date Received: 9/12/1989
Receipt No: ED10266
Received By: SEN

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT J. JACKSON
Address: P.O. BOX 104
IRWIN, ID

208-483-2027

83428

OR

Name: BONNIE JACKSON
Address: P.O. BOX 104
IRWIN, ID

208-483-2027

83428

2. Date of Priority: MAY 01, 1950

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
01N	44E	21	SE	SW	NW		BONNEVILLE
			NE	NW	SW		BONNEVILLE

5. Description of diverting works:
75' WELL W/ 1.0 HP SUBMERSIBLE PUMP. PIPED TO RESTURANT/HYDRANTS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
COMMERCIAL	01/01	12/31	0.060		
IRRIGATION	04/01	11/01	0.060		

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

8. Total consumptive use is 7.5 Acre Feet Per Annum.

9. Non-irrigation uses:
COMMERCIAL USE AT RESURANT/BAR, IRR. YARDS

A23-10207

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Date: 09/12/89

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NOV 06 1992



10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
01N	44E	21	NE	SW		IRR	1.5
			NW	SW		IRR	1.5
			NW	SW		COMMER	
						Section Acres	3.0
						Total Acres	3.0

11. Place of use in counties: BONNEVILLE

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

13. Other Water Rights Used:
NONE

14. Remarks:

BUSINESS KNOWN AS "COVERED WAGON SALOON AND STEAK HOUSE"
THERE ARE TWO WELLS IN THE SE1/4 SW1/4 NW1/4 SEC. 21 THAT ARE
USED TO SUPPLY WATER TO THIS PROPERTY ON OCCASSION.

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: 1

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): Robert Jackson Date: 9/12/89
Date: _____

State of Idaho)
County of Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 12 day
of September 19 89

Ea Bone
Notary Public

Seal

Residing at Idaho Falls, Id
My Commission Expires 22 Aug 1994

08/22/2003

**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 23-10207

BONNIE JACKSON

PO BOX 104

IRWIN ID 83428

Telephone Number: (208)483-2027

ROBERT J JACKSON

PO BOX 104

IRWIN ID 83428

Telephone Number: (208)483-2027

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):
2. Describe the changes you wish to make in the proposed recommendation:
3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 3-16-04 SIGNATURE: Robert J Jackson

Please print your name: _____

IDWR Regional Office,

Ownership change removing Bonnie Jackson to be mailed in.

Contacts Data Entry Form

Water Right No. 23-10207

Owner Type	Full Name	Address	City	State	Zip	Phone
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Current Owner	ROBT JACKSON					
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Name connector: and _____, or _____, and/or _____						
---	--	--	--	--	--	--

Current Owner	DBA: COVER WAGON BAR & CAFE					
---------------	-----------------------------	--	--	--	--	--

Current Owner						
---------------	--	--	--	--	--	--

Representing Attorney:						Phone Number:
------------------------	--	--	--	--	--	---------------

Accompanied By:						Phone Number:
-----------------	--	--	--	--	--	---------------

Relationship to Claimant:						
---------------------------	--	--	--	--	--	--

Date of Field Exam:			Time:			
---------------------	--	--	-------	--	--	--

Directions to Property (if different from above) and/or update owner information:

BU CLAIMFE: 9/19/03 SDP, AKOWELL @ BAR SERVES ONLY THIS BAR/CAFE (Sales, Restrooms)
NO IRRIGATIONNO INTERDID ENG. DATA SMISST.FE: POD, INTERCONNECTION W/ OTHER WELLS, 1/5/03

Reviewer: _____

Date: _____

Priority Date Data Entry Form

Claim Number: _____

Water Right Priority Date: _____ Water Right Basis: _____

Claimed Priority Date: MAY 1, 1950 Claimed Basis: BURecommended Priority Date: MAY 1 1952 Recommended Basis: BU☐ Use Claimed Priority Date and Basis as Recommended Priority Date and Basis

Document the evidence submitted/reviewed for the priority date claimed, include your analysis of the evidence:

CLAIMS MAY 1 1950. AFFIDAVIT OF BOYD CHRISTENSEN
STATES 1952 FOR CORONA WAGON BAY / CARG.

Reviewer: _____

Date: _____

Point of Diversion and Source Data Entry Form

Claim Number: _____

Water Right Point of Diversion: T____, R____, Sec.____,____,____,____ County: _____

Source: _____ Tributary: _____

Claimed Point of Diversion: T____, R____, Sec.____,____,____,____ County: _____

Source: _____ Tributary: _____

Recommended Point of Diversion: T____, R____, Sec.____,____,____,____ County: _____

Source: _____ Tributary: _____

____ Use Claimed POD and Source as Recommended POD and Source

Twp	Rge	Sec	Gov Lot	QQ of QQ of Q	County	Source
1N	44E	21		NENWSW	Benn.	Gul.
GPS Coordinates: _____						

GPS Coordinates: _____						

GPS Coordinates: _____						

GPS Coordinates: _____						

GPS Coordinates: _____						

GPS Coordinates: _____						

Other rights from this POD? GPS TAG # A0411976 (INTERRUPT) PIT IN BACK OF BAR

Document how the POD and Source were verified and/or Pump and Motor data:

1/2 - 3/4 HP Sub Pump - RESTROOMS AND BAR/RESTAURANT Sinks.THIS WELL IS NOT CONNECTED TO THE HM OR TRAILOR PARK.

Transfers Changing POD _____

Reviewer: _____

Date: _____

Place Of Use Data Entry Form

Claim Number: _____

_____ Use Claimed POU as Recommended POU

Claimed Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use

Total Acres _____

Recommended Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use

Total Acres _____

Document how the POU was verified:

THERE IS NO IRRIGATION FROM THIS WELL - ONLY PAN/CAPB SERVICE.

Transfers Changing POU _____

Reviewer: _____

Date: _____

Period of Use and Quantity Data Entry Form

Claim Number: _____

☐ Use Claimed Period of Use and Quantity as Recommended Period of Use and Quantity

Water Right Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____ Overall Diversion Volume _____

Claimed Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____ Overall Diversion Volume _____

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
Commercial	1/1	12/31	0.06	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____ Overall Diversion Volume _____

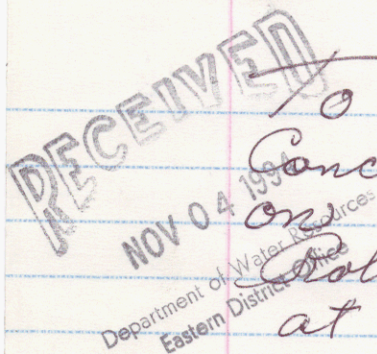
Document how the Period of Use and/or Diversion Rate were verified:

*See/Check**Q < 0.20 cfs ⇒ MEASURES NOT REQ'D.**N Remarks*

Reviewer: _____

Date: _____

Robert Jackson
11/2/94



To Idaho Dept of Water Resources
Concerning Evidence of Priority
on 3 Wells Now owned By
Robert and Bonnie Jackson
at Gruin Idaho

NO A2310207 Irrigation and Commercial

I Boyd Champion Kerk State That
I have Personal ~~Knowledge~~ Knowledge
that the water on Property at (also Listed Below)
TOIN R44E S21 SESWNW NENWSW
was in use and being used for Irrigation
and Commercial (Business Name Covered
Wagon) for the year 1952

Included is

NO A23-10208 TOIN R44E S21 SESWNW
Water use (Commercial)

Was in use and Being used as commercial at
Business now known as Jacksons RV Court Gruin Idaho
For the year of 1952.

Also Included

NO A2310209 (Irrigation Stockwater Domestic)
Was in use for Domestic Stockwater Irrigation
at TOIN R44E S21 SESWNW
(Known at Jackson Residence) For the year 1944

I Boyd Champion State that the 3 Wells
Listed above were being used at

Joy Mayle
Notary Public
Suevin J83428
Exp 9-20-2000

Boyd Champion

NOV 07 1996

17 16

20 21

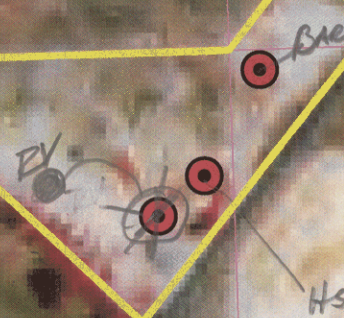
T1N, R44E

Robert Jackson
23-10207,
23-10208,
23-10209

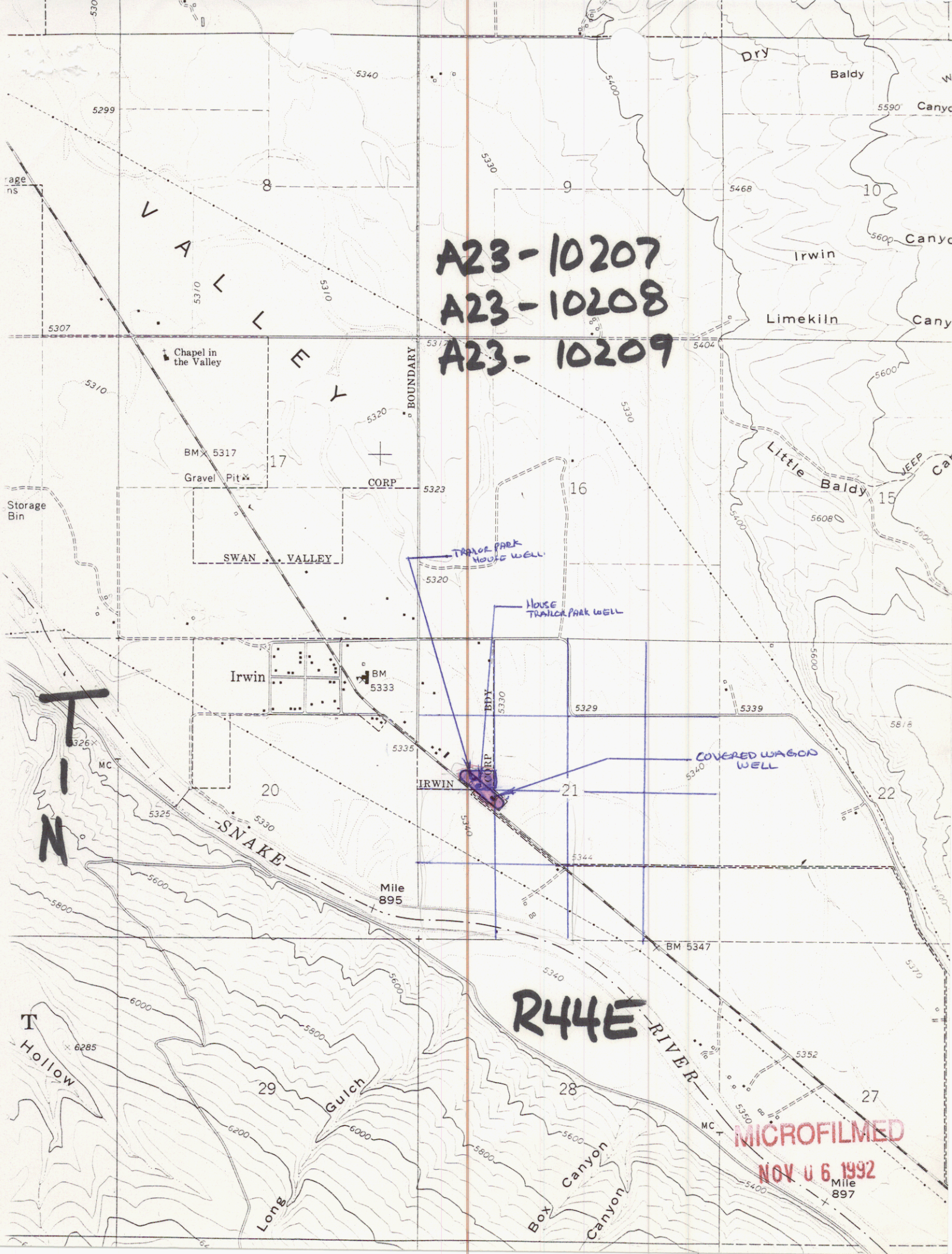
SWNW

NWSW

NESW



A23-10207
A23-10208
A23-10209



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