01/23/2004

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

RIGHT NUMBER: 23-10256

NAME AND ADDRESS:
DUANE N DENNING
4084 E 129 N
PO BOX 460
UCON ID 83454

VIOLA M DENNING
PO BOX 460
UCON ID 83454

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS

The quantity of water under this right shall not exceed 2,500 gallons per day.

PRIORITY DATE: 05/06/1942

POINT OF DIVERSION:

T01N R44E S35 NESENW Within BONNEVILLE County

PURPOSE AND PERIOD OF USE:

PURPOSE OF USE	PERIOD OF USE	QUANTITY
COMMERCIAL	1/01 12/31	0.040 CFS

PLACE OF USE: COMMERCIAL Within BONNEVILLE County

T01N R44E S35 SENW

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.

The quantity of water decreed for this water right is not a determination of historical beneficial use.

EXPLANATORY MATERIAL: Beneficial Use

X

DATA ENTRY BY Cd

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: A23-10256
Date Received: 9/29/1989
Receipt No: E010898
Received By: ____________

A2310256

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

1. Name: DUANE N. DENNING 208-523-4600
Address: P.O. BOX 460
UCON, ID 83454
AND/OR
Name: VIOLA M. DENNING 208-523-4770
Address: P.O. BOX 460
UCON, ID 83454

2. Date of Priority: MAY 06, 1942

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
01N	44E	35	SW	SW	NE		BONNEVILLE

5. Description of diverting works:
WELL, 6" CASING, SUB. PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
COMMERCIAL	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:
C/1 SERVICE STATION AND SNACK BAR

MICROFILMED
NOV 0 6 1992

10. Place of Use:

Township	Range	Section	1/4 of 1/4		Lot	Use	Acres
01N	44E	35	SW	NE	4	COMMER	

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:

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: ____________

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)
) SS.
County of ____________)

Subscribed and sworn (or affirmed) before me this ______ day

of ____________ 19 ______ ______________________
Notary Public

Seal

Residing at ______________________

My Commission Expires ____________

MICROFILMED
NOV 06 1992

Form No. 42-1409 (2) a 1/88

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 A23-10256
Date Received 9-29-89 ct
Receipt Number E010898

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Duane N. and/or Viola M. Denning Phone (208) 523-4770 523-4600
   Mailing Address P.O. Box 460 Ucon, ID Zip 83454
2. Date of Priority (Only one (1) per claim) May 6, 1942
3. Source of water supply (a) Groundwater
   which is tributary to (b) ____
4. a. Location of existing point of diversion is: Township 1N Range 44E Section 35,
   SW 1/4 of SW 1/4 of NE 1/4, Govt. Lot, 4 B.M., County of Bonneville
   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 ____ 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. Well, 6" casing, submersible pump.

MICROFILMED
NOV 06 1992

6. Water is claimed for the following purposes:

(both dates are inclusive) (cfs) (acre feet)

For Commercial purposes from 1-1 to 12-31 amount .04 or ______

For ______ purposes from ______ to ______ amount ______ or ______

For ______ purposes from ______ to ______ amount ______ or ______

For ______ purposes from ______ to ______ amount ______ or ______

7. Total quantity claimed (a) 0.04 (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.) Commercial, 1 Service station + snack bar

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	
1N	44E	35			Lot 4 C														

Total number of acres irrigated ______

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

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. ______ or None (X)

14. Remarks:

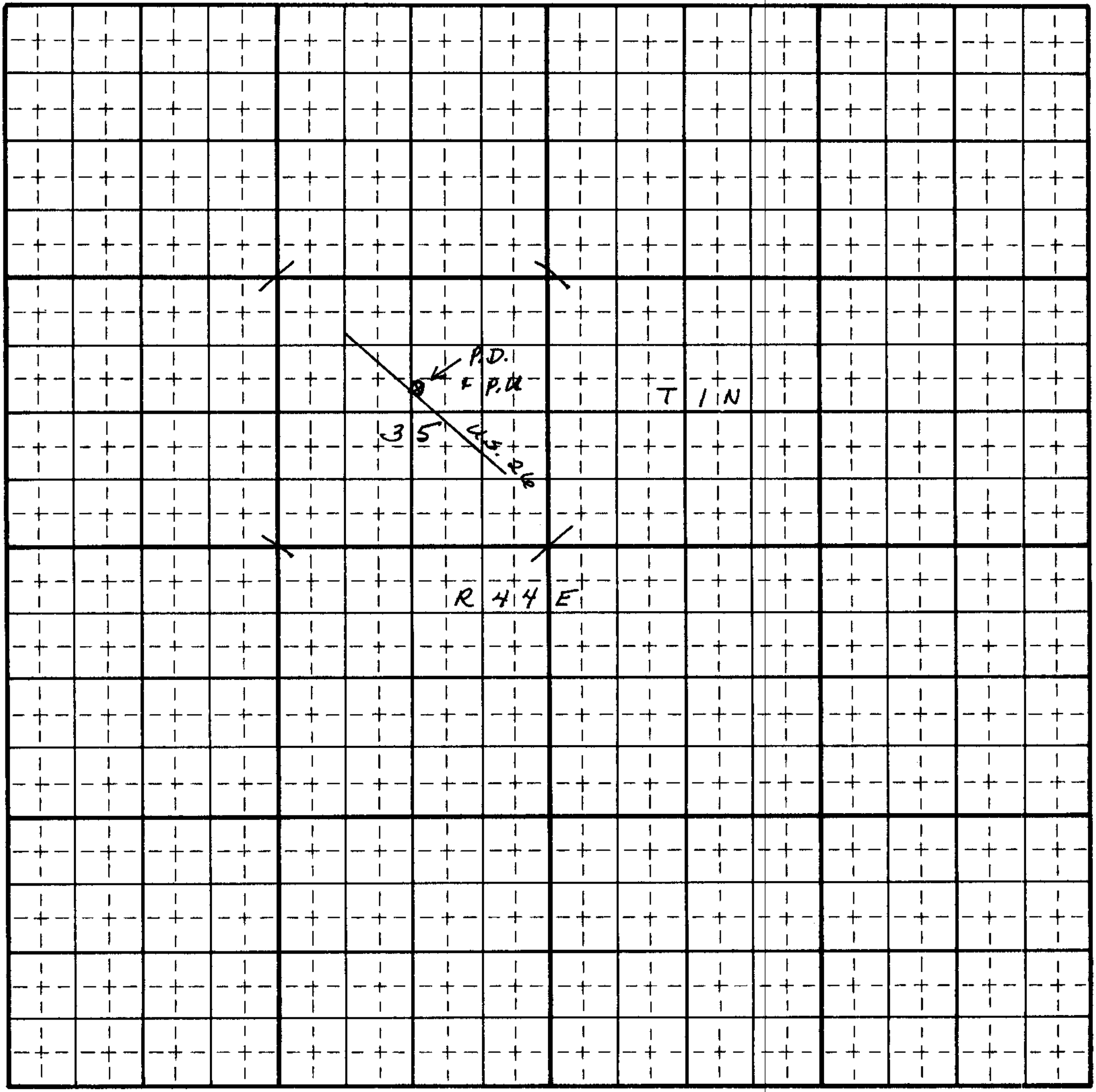
MICROFILMED
NOV 06 1992

Last Name Denning Ident No. A23-10256

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



Last Name Denning Ident No. A23-10256 *Copies: White-State, Yellow-Claimant*

MICROFILMED
NOV 06 1992

15. Basis of Claim (check one) Beneficial Use ✓ Posted Notice ______ License ______ Permit ______ Decree ______

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 ______ 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) Viola Denning Date 9-29-89

______ Date ______

For Organizations: I do solemnly swear or affirm that I am ______ (Title)

of ______ (Organization), that I have signed the foregoing

document in the space below as ______ (Title) of ______ (Organization)

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

Signature of Authorized Agent ______

Title and Organization ______ Date ______

State of Idaho/or ______)

) SS.

County of Bonneville)

Subscribed and sworn (or affirmed) before me this 29th day of September 19 89

SEAL

Notary Public Carter Fritschle

Residing at Carter Fritschle, Notary Public

Residing at Eagle, Idaho

My Commission Expires My commission Expires March 21, 1994

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 ______

MICROFILMED

NOV 06 1992

Last Name Denning Ident. Number A23-10256

Copies White-State, Yellow-Claimant

IDWR Field Exam Form

04/03/2002

Contacts Data Entry Form

Owner Type Full Name Address City State Zip Phone

Current Owner DUANE DENNING

Name connector: and ____, or ____, and/or ______

Current Owner

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:

BENEFICIAL USE CLAIM

FE: NLO 11/1/03

FE: POD/Well, USE, System

Reviewer: Date:

IDWR Field Exam Form

04/03/2002

Priority Date Data Entry Form

Claim Number: __________

Water Right Priority Date: __________ Water Right Basis: __________

Claimed Priority Date: May 6, 1942 Claimed Basis: Beneficial Use

Recommended Priority Date: 8/5/1952 Recommended Basis "

____ **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:

Evidence Supports Back to 8/5/1952, By Notarized Statement of Harley Vollman.

Reviewer: __________ Date: __________

IDWR Field Exam Form

04/03/2002

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 1N, R 44E, Sec. 35, SW, SW, NE. County: Bonn

Source: GW 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	QQQ of QQ of Q	County	Source
1N	44E	35			Bonn	GW

GPS Coordinates: ______
GPS Coordinates: ______
GPS Coordinates: ______
GPS Coordinates: ______
GPS Coordinates: ______
GPS Coordinates: ______
GPS Coordinates: ______

Other rights from this POD? GPS TAG # A0 009518 well Casing

N06

N11

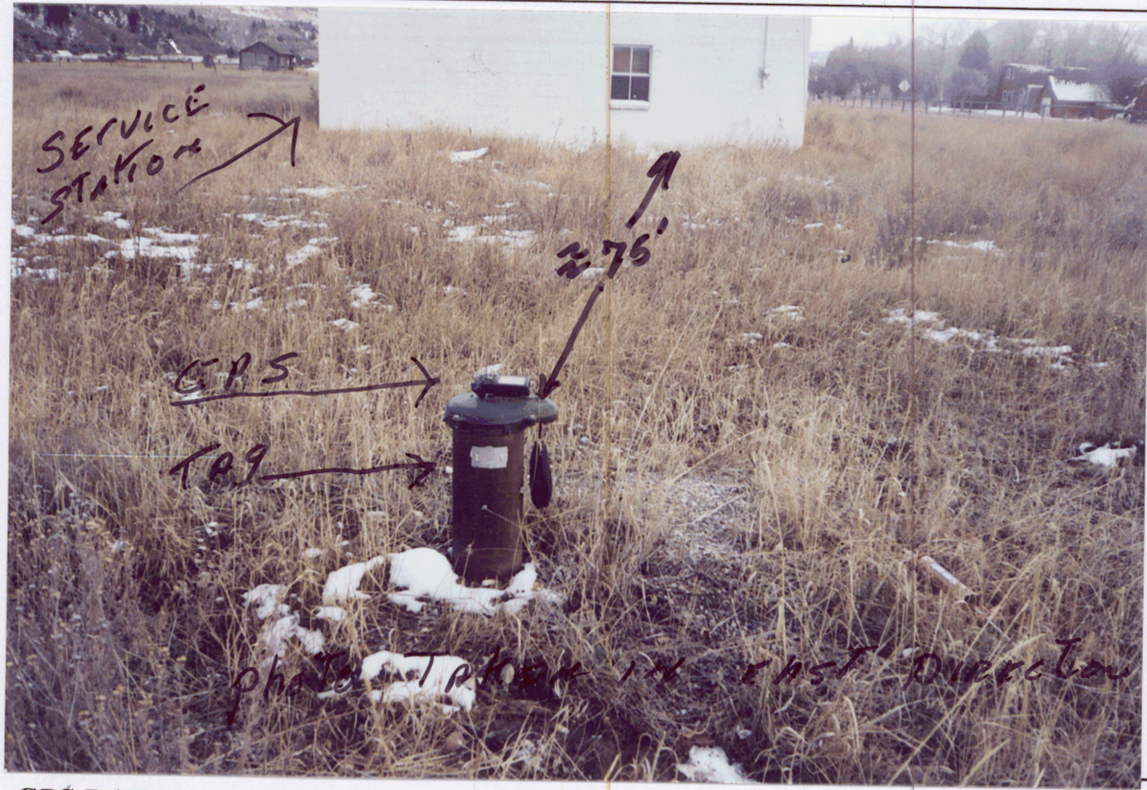
Document how the POD and Source were verified and/or Pump and Motor data:

Well to Service Station

Transfers Changing POD ______

Reviewer: ______ Date: ______

Water Right No(s). A2310256



GPS DATA:

Tag # A0 009518 Location: Well casing

Diversion Data:

Source: Well water. well Trib to: Ground Water

MOTOR
Make: Submergable Model: NA. Hp: 3/4
SN: NA

PUMP
Make: Submergable Model: NA Disch: NA.
SN: NA.

NOTES:

RP01N44E351515

Field Exam Date: 11-1-03 Agent: NICK Olson

IDWR Field Exam Form

04/03/2002

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
1N	44E	35	SWNE	Bonn	4		Comm

Total Acres _________

Recommended Place of Use

Twp	Rge	Sec	QQ Q	County	Lot Num	Acres	Purpose of Use
1N	44E	35	SENW	Bonn			Comm

Total Acres _________

Document how the POU was verified:

POU APPEARS CLAIMED IN WRONG QQ - BU NO C03

Transfers Changing POU ____________________

Reviewer: ____________

Date: ____________

IDWR Field Exam Form 04/03/2002

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
Comm			0.04	

Overall Diversion Rate ____________ Overall Diversion Volume ____________

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
Comm			0.04	

Overall Diversion Rate ____________ Overall Diversion Volume ____________

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

Used Car Service Station

N06
N11

Reviewer: ______________ Date: ____________

MAILED
7/8/03

July 7, 2003

Duane Denning
PO Box 460
Ucon ID 83454

RE: EVIDENCE OF PRIORITY FOR WATER RIGHT CLAIMS 23-10255 and 23-10256

Dear Claimant (s):

The Idaho Department of Water Resources is nearing the end of water rights review in Basin 23. The Notice(s) of Claim identified with the number shown above has been filed in the Snake River Basin Adjudication (SRBA). The Notice of Claim indicates water usage is based on "Beneficial Use". Water rights of this type are established by the historical use of water, dating back to when water was first used for the purpose claimed, at or on the place of use identified on the Claim. The date the water was first put to beneficial use, known as the priority date, has not been confirmed by License, Decree, or Permit. For this reason, proof must be provided supporting the priority date. **As the claimant, you are responsible for submitting the necessary proof to support the priority date.**

Your claims; 23-10255 referenced above, shows a Priority Date of June 27, 1953, from a well, and, 23-10256 also referenced above, show a priority date of May 6, 1942 from a well.

It is important that each element of the Notice of Claim be verified. For instance, regarding claims for irrigation, the evidence should tend to show that diversion works were in place, that they were capable of diverting the claimed diversion rate, and that the diverted water was beneficially used on the entire claimed place of use on or before the claimed priority date.

For your reference, I have provided a printout of your Notice of Claim and the pamphlet entitled **"Evidence of Priority"**. The pamphlet describes the types of evidence required and suggests which documents will fulfill this requirement. While I encourage you to read the entire pamphlet, I direct your attention to the two sections entitled **"What Kind of Evidence is Required"** and **"Some Examples of Documents Which May Be Evidence of the Priority Date"**.

It is our goal to recommend historical water rights within the Snake River Basin as accurately as possible. Field exams to verify other elements of the Notice of Claim have been or soon will be conducted by Department personnel.

The Department will not recommend the Notice of Claim be decreed by the court if evidence of a priority date is not submitted. The Notice of Claim will be disallowed.

Please submit the documentation supporting the priority date **within 30 days of the date of this letter, referencing all documents with the corresponding Claim number.** If you have any questions not covered by this letter or the enclosed pamphlet, please feel free to contact this office.

Respectfully submitted,

Allen B. Ruberry
Sr. Water Resource Agent
Adjudication Bureau

cc: File

Enclosure: Brochure on "Evidence of Priority"
Notice of Claims (copies) 23-10255 and 23-10256

Jan 9, 2004

My parents owned this property in 8-5-1952 with our home, cabins, hook-up for trailers and with washroom and rest rooms. Also the Service Station and Snack Bar that had rest room

Harley F. Vollm

01-09-04

BROOK A. FARMER

Brook A. Farmer - Notary
Idaho Falls ID 83401
Comm. Exp. 9-17-2004

This 9th day of January, 2004.

Used as Evidence of Priority

RECEIPT Date Sept 5 19 76 No. 8765

Received From Fred [illegible]

Address 636 Alder

[illegible]

Dollars $ 2 50

For Green [illegible] Parking

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	250
AMT. PAID		CHECK	
BALANCE DUE		MONEY ORDER	

By S. R. Ullman

BK800 Rediform

ROYAL CROWN COLA BOTTLING CO.

DIAL 522-9032 **IDAHO FALLS, IDAHO 83401** **P.O. BOX 46**

SOLD TO 299028 1
DUTCH'S RICHFIELD SERVICE

PALISADES, IDAHO 83437

DATE 6/18/80

DESCRIPTION		Price & Deposit	QUAN.	AMOUNT
ROYAL CROWN COLA	10 oz.	275	1	275
" " "	16 oz.			
DIET-RITE COLA	12 oz.			
D. R. LEMON LIME	10 oz.			
FROSTIE	10 oz.	275	1	275
"	16 oz.			
NEHI	10 oz.			
"	12 oz.	315	1	315
BUBBLE UP	10 oz.			
" "	16 oz.			
" "	12 oz.			
LO-CAL SQUIRT	10 oz.			
WHITE ROCK SPARKLING WATER	28 oz.			
" " GINGERALE	28 oz.			
BUBBLE UP	28 oz.			
SQUIRT	28 oz.			
QUININE	10 oz. NR.			
CANS	12 oz.			
VENDOR COLLECTIONS				
TOTAL CHARGES →				865

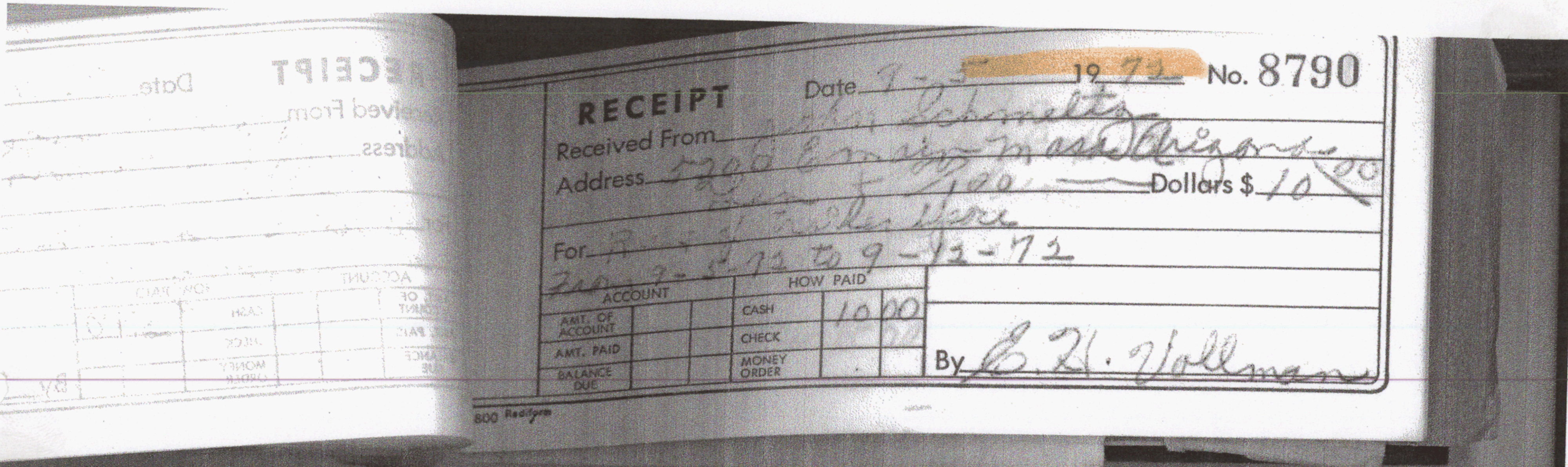
EMPTIES RETURNED	DEPOSIT	QUAN.	AMOUNT	
CASES	100	3	500	*Thank You*
CASES				
EMPTY SHELLS				
BOTTLES				
TOTAL RETURNED DEPOSITS →				3.00
NET AMOUNT DUE →				565

H 23826

ACCOUNTS DUE AND PAYABLE 10TH OF THE MONTH. 1½% SERVICE CHARGE PER MONTH WHICH IS AN ANNUAL INTEREST OF 18% APPLIED ON PAST DUE ACCOUNTS.

DRIVER ______ REC'D BY ______

Ⓤ 240765



RECEIPT

Date 7-5 19 72 No. 8790

Received From Arthur Schmeltz

Address 5206 E. [illegible] Mesa Arizona

Ten & 00/100 ——— Dollars $ 10 00/100

[illegible] Trailer Space

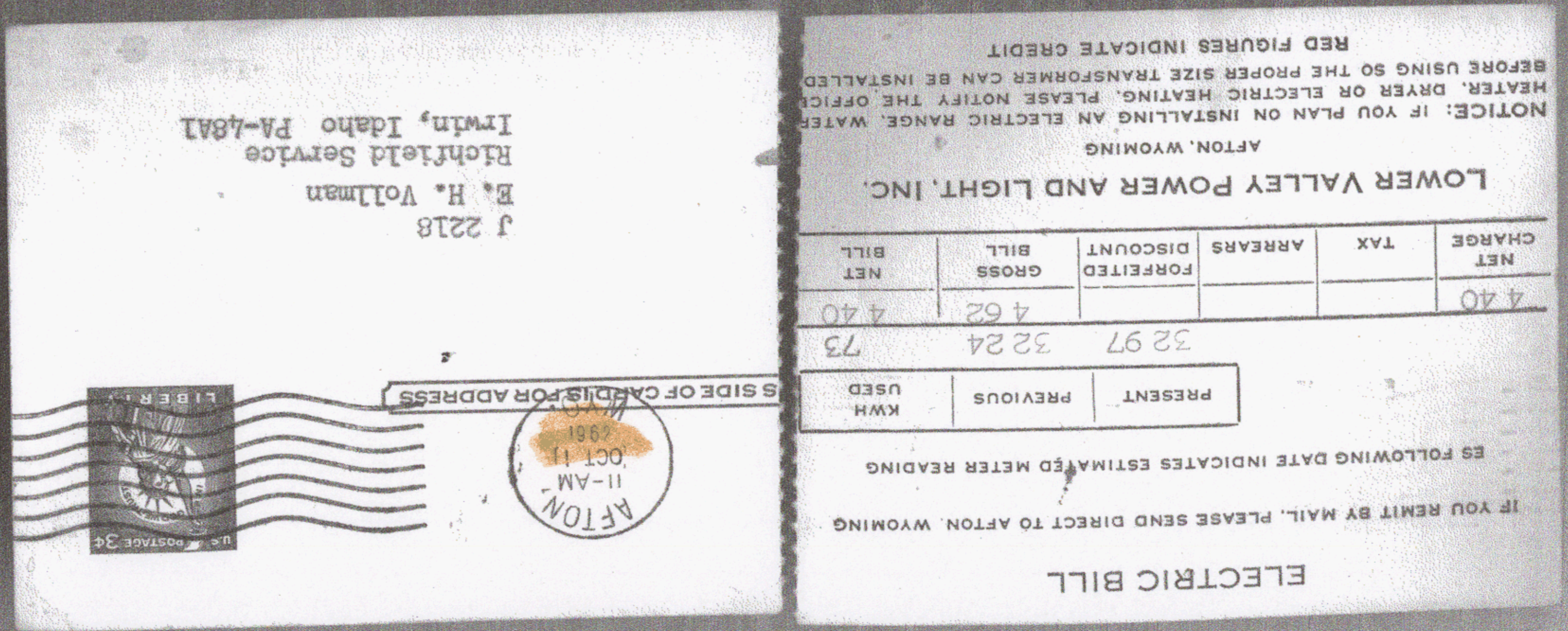
For [illegible] 8-12-72 to 9-12-72

[illegible] 9-5-72 to

ACCOUNT			HOW PAID		
AMT. OF ACCOUNT			CASH	10	00
AMT. PAID			CHECK		
BALANCE DUE			MONEY ORDER		

By E. H. Vollman

800 Rediform



ELECTRIC BILL

IF YOU REMIT BY MAIL, PLEASE SEND DIRECT TO AFTON, WYOMING

ES FOLLOWING DATE INDICATES ESTIMATED METER READING

PRESENT	PREVIOUS	KWH USED
32 97	32 24	73

NET CHARGE	TAX	ARREARS	FORFEITED DISCOUNT	GROSS BILL	NET BILL
4 40				4 62	4 40

LOWER VALLEY POWER AND LIGHT, INC.

AFTON, WYOMING

NOTICE: IF YOU PLAN ON INSTALLING AN ELECTRIC RANGE, WATER HEATER, DRYER OR ELECTRIC HEATING, PLEASE NOTIFY THE OFFICE BEFORE USING SO THE PROPER SIZE TRANSFORMER CAN BE INSTALLED

RED FIGURES INDICATE CREDIT

S SIDE OF CARD IS FOR ADDRESS

AFTON, WYO. 11-AM OCT 11 1962

U.S. POSTAGE 3¢ LIBERTY

J 2218
E. H. Vollman
Richfield Service
Irwin, Idaho PA-48A1

RECEIPT

Date Oct 13 1967 No. 8742

Received From Garrett Smith

Address

[illegible]

For Parts Dollars $ 2.00

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	
AMT. PAID		CHECK	
BALANCE DUE		MONEY ORDER	

By Dutch's Richfield

By S R V.

8K800 Rediform

ROYAL CROWN COLA BOTTLING CO.

DIAL 522-9032 IDAHO FALLS, IDAHO 83401 P. O. BOX 46

SOLD TO
299028 1
DUTCH'S RICHFIELD SERVICE

PALISADES, IDAHO 83437

DATE 7/26/67

DESCRIPTION		Price&Deposit	QUAN.	AMOUNT	
ROYAL CROWN COLA	10 oz.	2.75	1	2	75
" " "	16 oz.				
DIET-RITE COLA	12 oz.				
D. R. LEMON LIME	10 oz.				
FROSTIE	10 oz.				
"	16 oz.				
NEHI	10 oz.				
"	12 oz.				
BUBBLE UP	10 oz.				
" "	16 oz.				
SQUIRT	7 oz.				
"	12 oz.				
LO-CAL SQUIRT	10 oz.				
WHITE ROCK SPARKLING WATER	28 oz.				
" " GINGERALE	28 oz.				
BUBBLE UP	28 oz.				
SQUIRT	28 oz.				
QUININE	10 oz. NR.				
CANS	12 oz.				
VENDOR COLLECTIONS					
TOTAL CHARGES →				2	75

EMPTIES RETURNED	DEPOSIT	QUAN.	AMOUNT	
CASES	1.00	1	1	00
CASES				
EMPTY SHELLS				
BOTTLES				

Thank You

TOTAL RETURNED DEPOSITS →	1	00
NET AMOUNT DUE →	1	75

G 35153

PROPER CARE MUST BE TAKEN OF ALL CASES
THEY ARE NOT SOLD BUT REMAIN THE PROPERTY OF

ROYAL CROWN COLA BOTTLING CO. of IDAHO FALLS

DRIVER ____ REC'D BY ____

FANNING WHOLESALE COMPANY

Phone 193 Market and Yellowstone Ave. P.

CANDY - CIGARS - CIGARETTES —— FISHING AND HUNTING SUPP
BAR AND FOUNTAIN SUPPLIES - GLASSWARE

T 94321 Idaho Falls, Idaho, 1-23

Sold to D&D Husky

Address Driggs

CASH SALE ☑ CHARGE SALE ☐ REC. ON ACCT. ☐ CREDI

QUAN.	ITEM	PER
	Ctn. Cigs.	306

Thanks
Clay

INVOICE

MOORE BUSINESS FORMS, INC., PACIFIC DIV.

Gas from Sargent
Oil " "
Feb 6, 1958

	Stormail
5 g tractor	
5 " "	46.5
12 Butler ticket	25
2 gal Arden eck	58
24 gal	47.5
26 tk Dutch	90.5
7 car Dutch	267.5
57 gal	25.5
14 Delivery tk	$293 @ ttl
7 car	9.5
78	302.5 gal

43
16.5
7
115.5

GAS — Fuel Oil Delivery — OIL

Phone 3403

~~DUTCH'S SERVICE~~
D + D SERVICE
~~Yellowstone Ave. & Oak~~
Irwin ~~POCATELLO~~, IDAHO

Customer's Order No. Date Jan 28 1957

M. Roy Stankewitz

Address

SOLD BY	CASH	C. O. D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT
			✓			

QUAN.	DESCRIPTION	PRICE	AMOUNT
44³	NO1 Stove Oil		8 13
5	Reg		1 60
2	Cans Brake fluid		1 60
7	Reg		2 25
9⁸	Reg		3 15
	Total		16 73

Roy Stankewitz

ALL claims and returned goods MUST be accompanied by this bill

7045 Rec'd by

MOORE BUSINESS FORMS, INC.

GAS

DUTCH'S SERVICE
Yellowstone Ave. & Oak
POCATELLO, IDAHO

Customer's Order No. Date 10-11 1956

M. Stanklewitz

Address

SOLD BY	CASH	C. O. D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT
20			✓			

QUAN.	DESCRIPTION	PRICE	AMOUNT
44²	No1 Fuel oil	18⁴	8 13
	Oct 13-56		1 6
5	Reg		
	Nov. 10-56		
2	Brake fluid		1 60
			11 3

ALL claims and returned goods MUST be accompanied by this bill

6940 Rec'd by

MOORE BUSINESS FORMS, INC.

STATEMENT

GAS

FUEL OIL DELIVERY

DUTCH'S SERVICE

Phone 3403

Yellowstone A

POCATELLO, IDAHO

22

Oct 13-1956

Roy Stankewitz

5 gal
Chg.
Evelyn Stankewitz

Nov. 11-56
13² Reg
Pd.

Dec. 17-56
9⁸ Reg

2 Brake fluid
44³ Stove Oil

Total

Glen Park

July 29 – 15¹

July					
	20		11	~~oil~~ oil	6.45
4	14		21 – 6		1.97
5	25		19 – 17¹	oil	6.13
6	7.8	$1.00 cash	38.3		14.55
July 7	7.9		32.9		
July 8	5'		34 47		
July	3,96.7		76 6		
	30.9		1149		
	53 7 3		1260.07		

3rd Load Feb 14 1956

From Sargent

Mac	59.5	= 10.71	paid
Perlina	46.5	= 8.37	paid
Tyler	45.5	= 8.19	paid
Lisa Adler	29	= 5.07	paid
Ernest	47.5	= 8.55	paid
Bell Adler	69.5	= 12.16	paid
	297.5 gd	$53.05	

FANNING WHOLESALE COMPANY, Inc.

Phone 193 Market and Yellowstone Ave. P. O. Box 248

CANDY - CIGARS - CIGARETTES —— FISHING AND HUNTING SUPPLIES
BAR AND FOUNTAIN SUPPLIES - GLASSWARE

T 94321

Idaho Falls, Idaho, 1-23 19[illegible]

Sold to D+D Husky

Address Drive[illegible]

CASH SALE ☑ CHARGE SALE ☐ REC. ON ACCT. ☐ CREDIT MEMO ☐

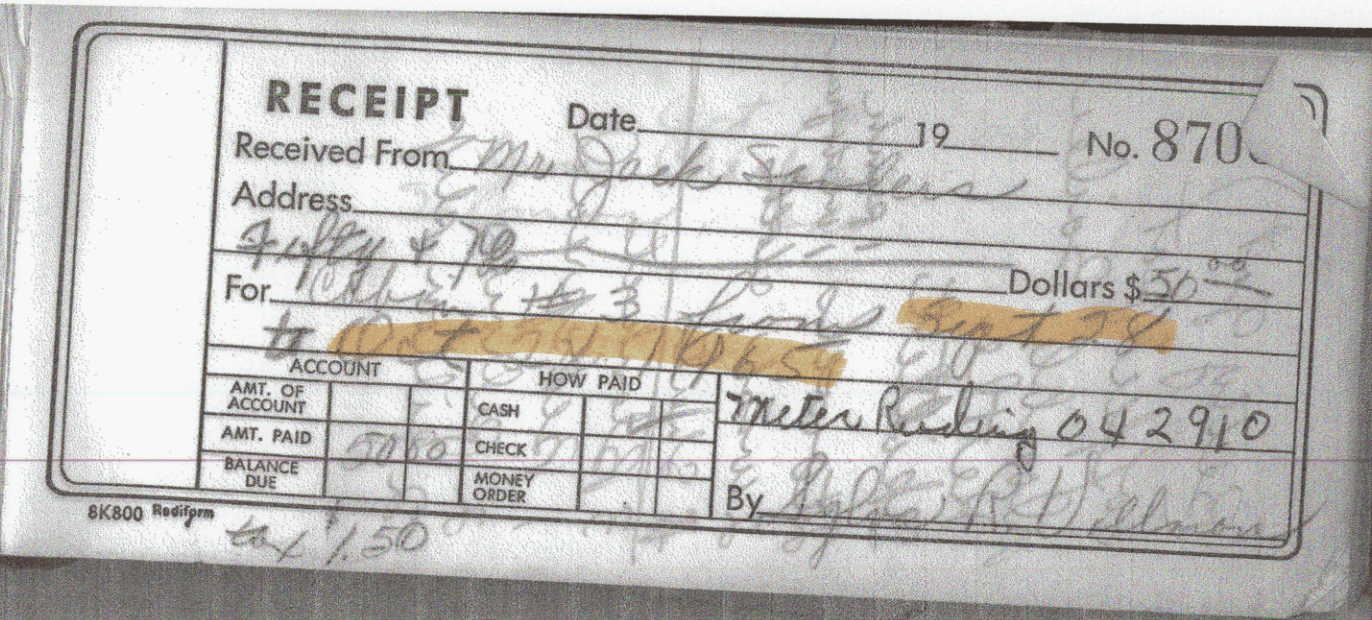
QUAN.	ITEM	PER	AMOUNT
2	Cty. Cigs.	206	4 12

Thanks
Clay

INVOICE

MOORE BUSINESS FORMS, INC., PACIFIC DIV.

16.50
3 30 gal
49.50 Stove oil
26.90 Reg gas 100 gal
$76.40 Paid to
H. O. Sargent
Feb 6, 1956
by
Dutch
1st Ford



RECEIPT Date __________ 19 ______ No. 870

Received From Mr Jack [illegible]

Address [illegible]

For Cabin #3 from Sept 28 to Oct 5th 1965 Dollars $50.00

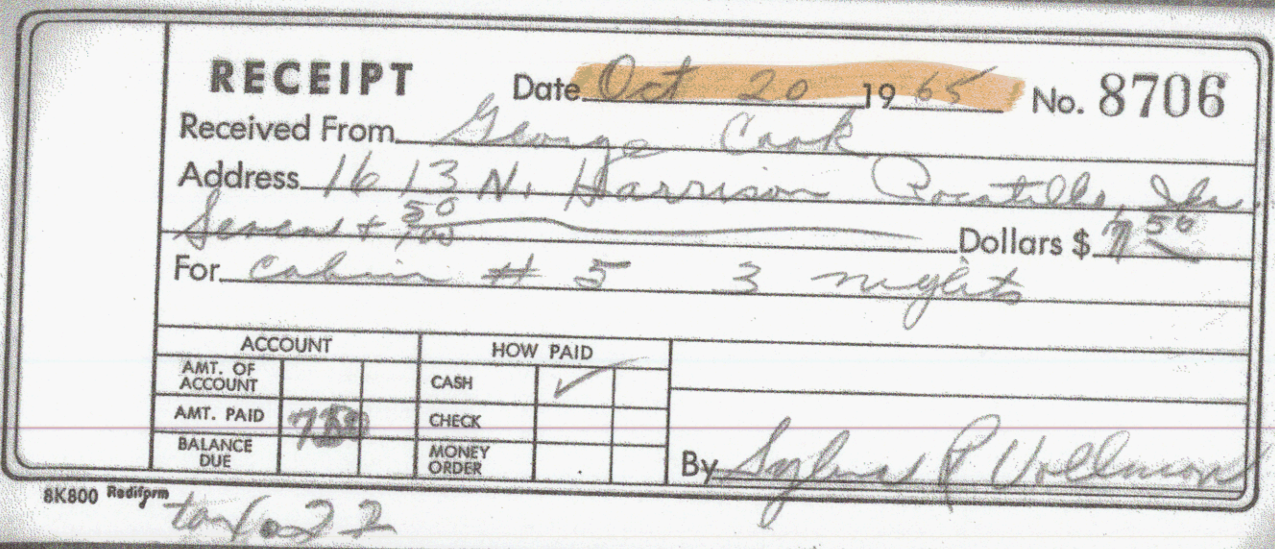
ACCOUNT			HOW PAID		
AMT. OF ACCOUNT			CASH		
AMT. PAID	50.00		CHECK		
BALANCE DUE			MONEY ORDER		

Meter Reading 042910

By Sylvia R. [illegible]

8K800 Rediform

tax 1.50



RECEIPT Date Oct 20 19 65 No. 8706

Received From George Cook

Address 1613 N. Harrison Pocatello, Ida.

Seven + $\frac{50}{100}$ Dollars $ 7^{50}

For cabin # 5 3 nights

ACCOUNT			HOW PAID		
AMT. OF ACCOUNT			CASH	✓	
AMT. PAID	7^{50}		CHECK		
BALANCE DUE			MONEY ORDER		

By Sylvia R Vollmer

8K800 Rediform

tax 022

RECEIPT Date Oct 20 1965 No. 8708

Received From Ray Aptman

Address

Ten + no/100 Dollars $10.00

For Cabin # 5 from Oct 20 to Oct 27th

ACCOUNT			HOW PAID		
AMT. OF ACCOUNT			CASH	✓	
AMT. PAID			CHECK		
BALANCE DUE			MONEY ORDER		

By Sylvia R. Ullman

8K800 Rediform

Tax .30

RECEIPT Date ~~Oct 20~~ 1965 No. 8707

Received From Sam Doney

Address

Ten + 50/100 Dollars $ 10^{50}

For Cabin # 2

from Oct 20 to Oct 27th

ACCOUNT			HOW PAID		
AMT. OF ACCOUNT			CASH		
AMT. PAID			CHECK		
BALANCE DUE			MONEY ORDER		

By Sylvia R Vollman

8K800 Rediform

tax .30

TRAILER COURT PERMIT

BONNEVILLE COUNTY — STATE OF IDAHO

№ 318

Business Name Highland Trailer Court

Address Irwin, Idaho

Operator E.H. Vollman

Quarter from July 1st. 1955 to Sept. 30th, 1955

Fee $ 7.50 Dated August 10th. 1955, 19

Attest:

Faryl L. Hansen M.D.
by V. Gilbert R.N.
County Health Officer

Bonneville County Board of Health

By C. N. [illegible]
Chairman

INVENTORY September 12, 1955

PAGE 1

HEET NO.

PRICED BY

ALLED BY

DEPARTMENT

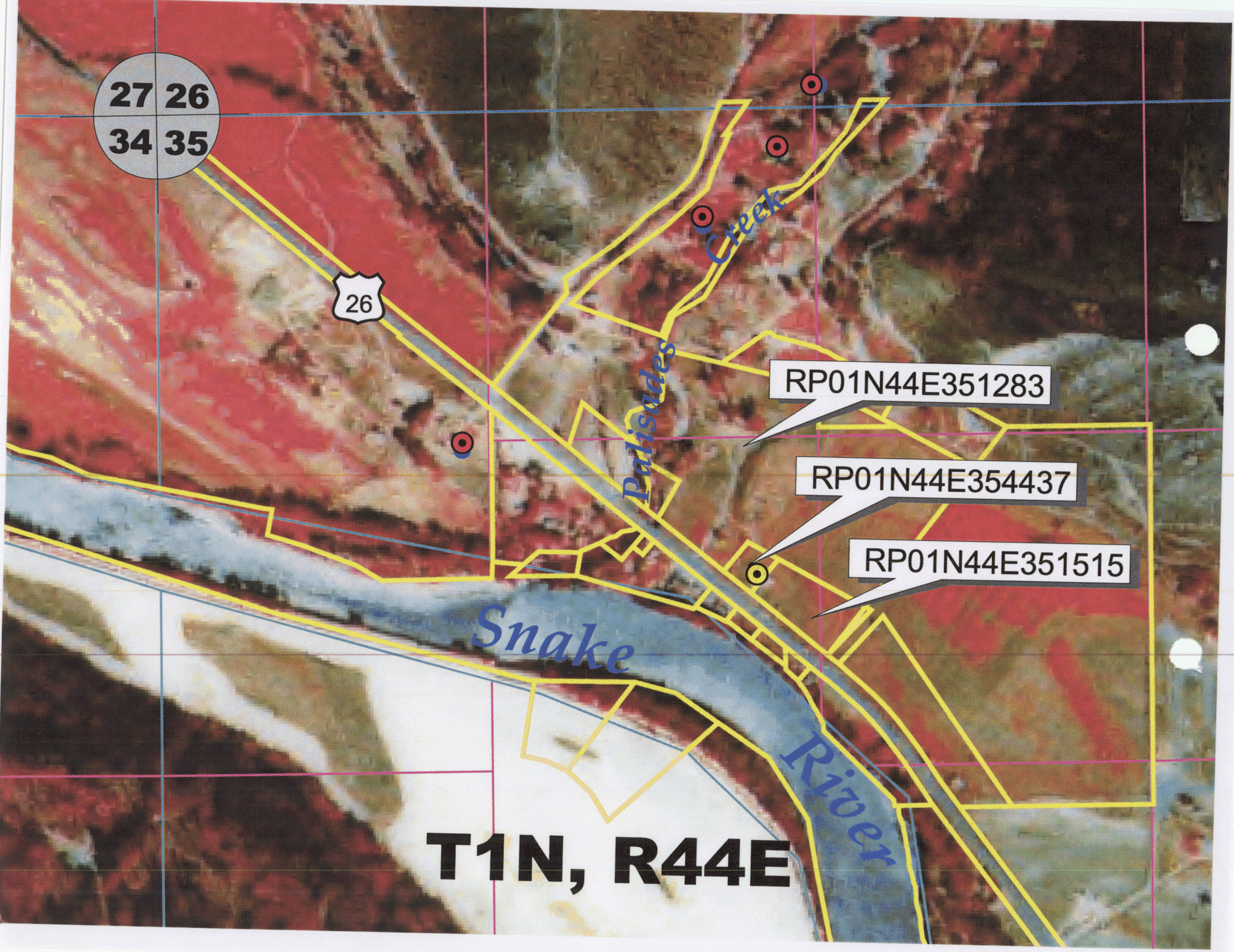
EXTENDED BY

NTERED BY

LOCATION

EXAMINED BY

IECK	QUANTITY	DESCRIPTION	✓	PRICE	UNIT	EXTENSIONS
	12	Filters AC P209		1.22		14.64
	2	PF210		1.33		2.66
	8	Fram C-3		1.01		8.08
	2	AC P-203x		1.01		2.02
	2	P-111		1.12		2.24
	1	P-112		1.33		1.33
	2	PF-319		1.79		3.58
	4	Fram C-31		1.90		7.60
	1	C-30		1.72		1.72
	1	DeLuxe CU-CS		1.22		1.22
	[illegible]	Fram FP 10-1 Water Cleaners		2.57		15.42
	15	Bug Screens		.75		11.25
	1	Freeman Headbolt Heater 7547CS		7.15		7.15
	1	" " " 7547C		7.15		7.15
	20	Gas Caps		.40		8.00
	35	Radiator Caps		.25		8.75
	3	Dual Loc Gas Caps		1.60		4.80
	7	Permatex Cleaner		.90		6.30
	10	Spark Plugs AC 46-5		.45		4.50
	8	46		.45		3.60
	6	44 Com.		.45		2.70
	10	45 Com.		.45		4.50
	3	45		.45		1.35
	9	Champ. H-10		.45		4.05
	3	Y-4A		.45		1.35
	13	2 Com.L		.45		5.85


27 26
34 35
26
Palisades Creek
RP01N44E351283
RP01N44E354437
RP01N44E351515
Snake River
T1N, R44E

ER-DEPARTMENT MEMO — 1

FROM Carter Fritschle **DATE** 9-29-89

TO Adj. Claim A23-10256

SUBJECT P/D & P/U of this claim may be in error. The service station did not appear on the orthophotoquad where the claimant stated it should be.

MICROFI
NOV 6

Carter F.