

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: 39356

Ident. Number A22-12339Date Received 12/14/88 *Extension granted*Receipt Number E005225

RECEIVED

DEC 14 1988

Department of Water Resources
Eastern District Office

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

AUG 29 1988

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) Kemdall Lee Ballard Phone (208) 356-3487
Mailing Address 1220 No 2000 West Rexburg, Idaho Zip 83440
2. Date of Priority (Only one (1) per claim) 12-31-49
3. Source of water supply (a) GROUND WATER
which is tributary to (b) _____
4. a. Location of existing point of diversion is: Township 6N Range 39E Section 12,
_____ 1/4 of SW 1/4 of SW 1/4, Govt. Lot, _____ B.M., County of Madison
Additional points of diversion if any: None
- 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 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.
Household well 150 foot deep (Plus one 30foot backup well in yard)

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Domestic purposes from 1 Jan to 31 Dec amount 104 or _____

For LAWN IRRIGATION purposes from 1 JAN to 31 DEC amount .03 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 104 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 2.5 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) _____

Water for house and approx one acre of lawn and garden.

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	
06N	39E	12												D					
06N	39E	12												ONE					

Total number of acres irrigated ONE

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

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

One Share Island Ward Canal Company

or None ()

14. Remarks:

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Last Name BALLARD Ident No. _____

Copies: White -State, Yellow-Claimant

Scale: 2 inches equals 1 mile

[illegible]

BALLARD

Ident No.

NOV 06 1992

Copies: White-State, Yellow-Claimant

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) Kendall Lee Bullard Date 8/26/88

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 Idaho)
County of Blaine) SS.

Subscribed and sworn (or affirmed) before me this 26 day of Aug. 19 88

SEAL

Notary Public Jeanne Allistone

Residing at St. Anthony Valley Bank

My Commission Expires 7-5-1994

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 _____

Last Name _____ Ident. Number _____

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Copies White-State, Yellow-Claimant