

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

Renumbered: A31-07558

Ident. Number: A34-07290

Date Received: 10/26/1989

Receipt No: E010928

Received By: EW

1/20/90
SC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: BLAIR CALAWAY 208-356-6291
Address: RT. 2 BOX 207
REXBURG, ID 83440

OR

Name: VELMA CALAWAY 208-356-6291
Address: RT. 2 BOX 207
REXBURG, ID 83440

2. Date of Priority: JAN 01, 1981

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
06N	34E	19	SW	NE	NW		JEFFERSON

5. Description of diverting works:

610' WELL WITH 200HP TURBINE PUMP TO MAINLINE AND CENTER PIVOTS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	6.400		

7. Total Quantity Appropriated is:

6.400 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 800.0 Acre Feet Per Annum.

9. Non-irrigation uses:

NONE

A34-07290

Page 1

MICROFILMED
Date: 10/26/89
NOV 14 1990

~~MICROFILMED~~
~~DEC 02 1992~~

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06N	34E	19	NE	NW		IRR	40.0
			NW	NW		IRR	40.0
			SW	NW		IRR	40.0
			SE	NW		IRR	40.0
			NE	SW		IRR	40.0
			NW	SW		IRR	40.0
			SW	SW		IRR	40.0
			SE	SW		IRR	40.0

Section Acres 320.0

Total Acres 320.0

11. Place of use in counties: JEFFERSON

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

13. Other Water Rights Used:
NONE

14. Remarks:

PERMIT WAS LAPSED FOR FAILURE TO PAY EXAM FEE. CLAIMANT PAID
EXAM FEE (SEE RECEIPT E010928) AND IS REQUESTING THAT THE PERMIT
BE REINSTATED BY THE DEPARTMENT.

15. Basis of Claim: PERMIT

MICROFILMED

~~MICROFILMED~~

~~DEC 2 1989~~

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

Remembered 43107558
CIVIL CASE NUMBER: 39576

Ident. Number 431-07290

Date Received 10-2-89

Receipt Number 6010928

ES

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

A3107558

Please type or print clearly

1. Name of Claimant (s) BLAIR OR VELMA CALAWAY Phone (208) 356-6291

Mailing Address Rt. 2, Box 207, Rexburg, ID. Zip 83440

2. Date of Priority (Only one (1) per claim) Jan 1, 1981

3. Source of water supply (a) GROUNDWATER
which is tributary to (b) _____

4. a. Location of existing point of diversion is: Township 6N Range 34E Section 19,
SW 1/4 of NE 1/4 of NW 1/4, Govt. Lot, _____ B.M., County of JEFFERSON

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. 610' w/ A 200HP TURBINE PUMP

TO MAINTAIN TO CENTER PILOTS MICROFILMED

NOV 14 1990

~~MICROFILMED~~

DEC 02 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For IRRIGATION purposes from 4/1 to 11/1 amount 6.40 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 6.40 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 800 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) NONE

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	
<u>6N</u>	<u>34E</u>	<u>19</u>					<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>					<u>320</u>

Total number of acres irrigated 320

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

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.
NONE or None ()

14. Remarks:

MICROFILMED
NOV 14 1990

Last Name _____ Ident No. _____

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 34-7290

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 1

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

Signature of Claimant (s) Blair Calaway Date 10-2-89

Date _____

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

of _____, that I have signed the foregoing
Organization

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 _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 2 day of October 1989

SEAL

Notary Public E. R. Rine

Residing at Shoshone Falls, ID.

My Commission Expires 22 Aug 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 _____

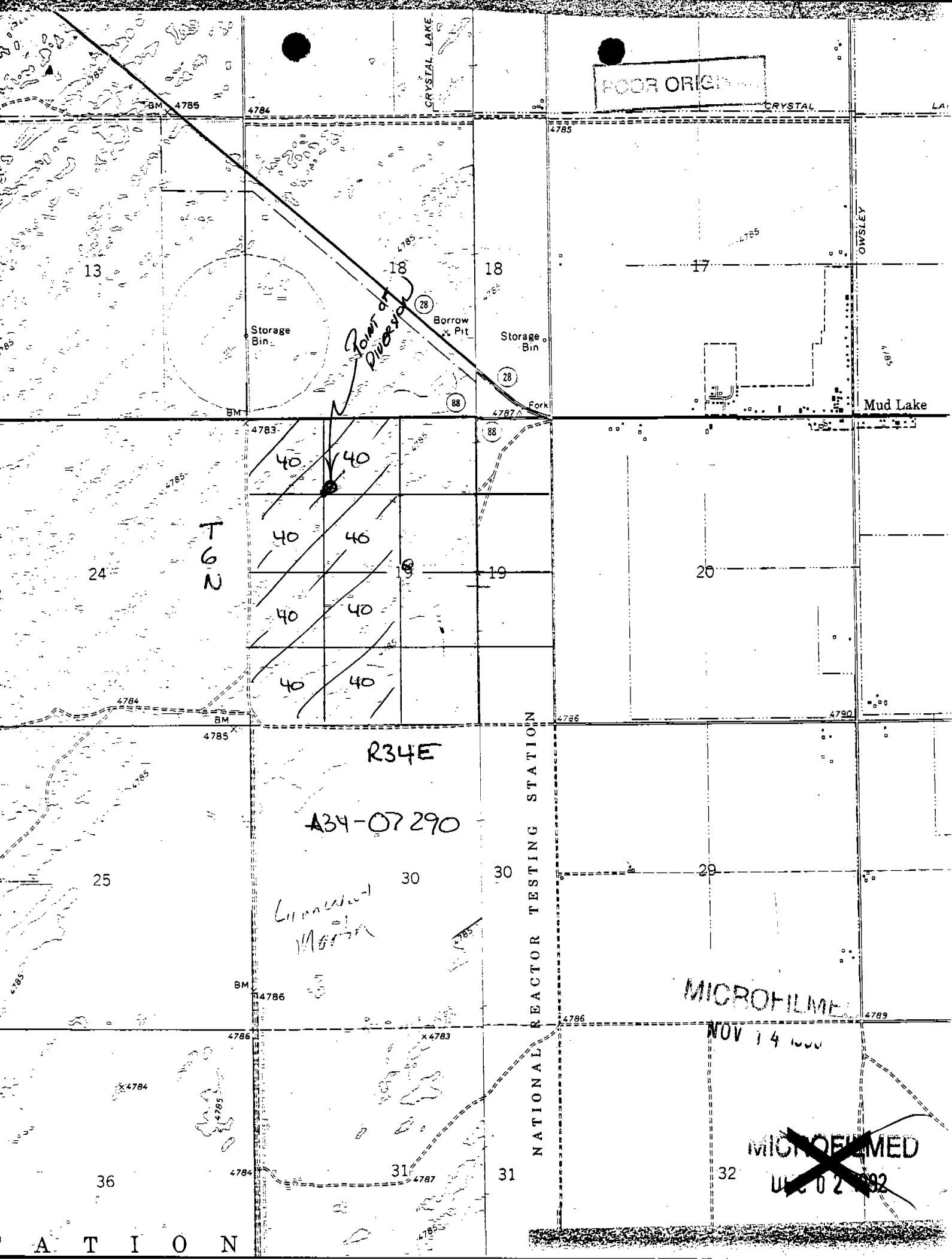
MICROFILMED

NOV 14 1990

~~MICROFILMED~~
~~DEC 8 2 1992~~

Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant



JANUARY 27, 1993

BLAIR CALAWAY
RT 2 BOX 207
REXBURG ID 83440

RE: RENUMBERED NOTICES

Dear Mr. Calaway:

The Department has changed the identification numbers for Notices of Claim #A34-07404 and #A34-07290. The new numbers are #A31-07563 and #A31-07558. We have also modified receipt #E010928 to reflect the new numbers.

A copy of the receipt and the Notices of Claim are enclosed for your records.

Respectfully submitted,

Ernest Carlsen
Water Rights Supervisor, Adjudications

EC:sc

Enclosure

MICROFILMED
NOV 14 1993

POOR ORIGINAL

E010928

10/ 2/1989

CALAWAY, BLAIR / VELMA

ADJUDICATION FEE

LATE FEE

EXAM FEES (31-7558 & 34-7404)

OVERPAYMENT

410162	9337	6490	1,026.00
410162	9337	6490	211.00
630121	1238	6490	500.00
410162	9337	6490	64.00

\$1,801.00

CHECK

1803

Water Right Numbers

A31-07563

A31-07558

A21-00182A A21-00182B

-

Region: EASTERN

Signature: _____

J. Cox
1/26/93

Renumbered from
A34-07404

Renumbered from
A34-07290

MICROFILMED

NOV 14 1990

4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

A31-07558

CLAIMANT'S NAME

CALAWA

CLAM IDENT. NO.

A34-07290

DATE RECEIVED

10/2/89

CK #

AMOUNT \$

YES NO Required Info?

1. Is the name and address complete with zip code? ☒ ☐ *
2. Is a priority date entered? ☒ ☐ *
- Is the priority date acceptable in view of mandatory filing dates? ☒ ☐ *
- See Adjudication Memos #1 and #4 to determine if a Permit is required. ☒ ☐ *
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, see Adjudication Memo # 4. ☐ N/A ☒ ☐ *
10. Is (are) the place(s) of use and purpose(s) indicated? ☒ ☐ *
11. Is (are) the county(ies) entered? ☒ ☐ *
12. Is the ownership of p.u. checked? ☒ ☐ *
13. Are other water rights listed or "none" indicated? ☒ ☐ *
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 indicated? ☒ ☐ *
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☐ N/A ☒ ☐ *
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ ☐ *
18. Has the claim been signed, sealed, and dated by a notary? ☒ ☐ *
19. Was this claim filed on time, or was an extension granted? ☒ ☐ *
20. Is the fee enclosed correct? ☐ Exempt ☒ ☐ *
21. If this claim is based on an existing water right, has the identification number been entered? ☐ N/A ☒ ☐ *
22. Should this claim be data entered? ☒ ☐ *

Claim checked by:

TO

Date:

Claim must be returned to claimant:

Claimant must be notified of modifications:

MICROFILMED
(Yes) ☒ (No) ☐
NOW ☒ (No) ☐

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date:

Date:

Checked by:

Date: 3-1-91

Comments:

PERMIT WAS LAPSED FOR FAILURE TO PAY EXAM FEE

CLAIMANT PAID EXAM FEE AND IS HOPING FOR REINSTATEMENT
PRIORITY DATE MAY CHANGE AFTER REINSTATEMENTMICROFILMED
DEC 02 1992