



State of Idaho

DEPARTMENT OF WATER RESOURCES

150 Shoup Ave., Suite 15, Idaho Falls, Idaho 83402 - (208) 525-7161

EASTERN REGION

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

September 14, 1989

Jean M. Clark
3291 W. 33 S.
Idaho Falls, ID 83402

RE: Water Right Claim Returned

Dear Mrs. Clark:

The Idaho Department of Water Resources (IDWR) is returning money order #04-399.817,123 (\$25.00) and Notice of Claim to a Water Right, received 9/13/89. The permit system for establishing a water right for "multiple domestic" wells became mandatory after March 25, 1963. If a permit to appropriate water was never completed for the post-1963 well, an application for permit should be submitted instead of the claim form.

However, if the original intention of the well was not to serve more than one house, and the houses were connected to the well at different times (different priority dates), a Notice of Claim for each house may be completed. Otherwise, a permit application is required rather than the two claims.

I have enclosed a permit application and instructions needed to apply for a "multiple domestic" water right. I have also enclosed new claim forms if the houses were connected at different times and you wish to file two claims (to preserve each priority date) rather than a permit application. (Note: If you are only filing the Notice of Claim for your one house, please correct Item #9 to "1 household", and return the notice and \$25.00 fee to the IDWR.) If you complete two claims separating the houses, the priority dates in Item #2 must be different.

The filing fee for two claims is \$50.00. The filing fee for the permit is \$30.00, but the priority date will be the date the application is received by the IDWR. If you complete the permit application for the two houses, the claims are not necessary. If you are returning the claims, they must be returned within 30-days of the date of this letter or additional \$50.00 late-fee will be assessed for each claim.

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If you have any questions, please contact Tony Olenichak,
Water Right Agent, or if you wish to make an appointment,
call the IDWR at (208)-525-7161.

Sincerely,

Tony Olenichak
for Ernest Carlsen

Ernest Carlsen
Adjudication Supervisor

Enclosure

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CLAIMANT'S NAME Joan Clark CLAIM IDENT. NO. A 35-12626

DATE RECEIVED 9-13-89 : # AMOUNT \$ YES NO Required Info?

- 1. Is the name and address complete with zip code? ☒ YES ☐ NO *
- 2. Is a priority date entered? ☒ YES ☐ NO *
- Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. ☒ YES ☐ NO *
- 3. (a) Is a source entered? ☒ YES ☐ NO *
- (b) Is a tributary to entered? (if required) N/A ☒ YES ☐ NO *
- 4. Is the legal description of the p.d. sufficient? ☒ YES ☐ NO *
- 5. Is there a description of the diverting works? ☒ YES ☐ NO *
- 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. ☒ YES ☐ NO *
- Is the period of use included? ☒ YES ☐ NO *
- Is a quantity claimed for each use? ☒ YES ☐ NO *
- 7. Is a total quantity claimed entered? ☒ YES ☐ NO *
- 8. If required is a consumptive use entered? N/A ☒ YES ☐ NO *
- Is the consumptive use correct? N/A ☒ YES ☐ NO *
- 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 ☒ YES ☐ NO *
- 10. Is (are) the place(s) of use and purpose(s) indicated? ☒ YES ☐ NO *
- 11. Is (are) the county(ies) entered? ☒ YES ☐ NO *
- 12. Is the ownership of p.u. checked? ☒ YES ☐ NO *
- 13. Are other water rights listed or "none" indicated? ☒ YES ☐ NO *
- 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 ☒ YES ☐ NO *
- 15. Is the basis of the claim indicated? ☒ YES ☐ NO *
- 16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) N/A ☒ YES ☐ NO *
- 17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ YES ☐ NO *
- 18. Has the claim been signed, sealed, and dated by a notary? ☒ YES ☐ NO *
- 19. Was this claim filed on time, or was an extension granted? ☒ YES ☐ NO *
- 20. Is the fee enclosed correct? Exempt ☒ YES ☐ NO *
- 21. If this claim is based on an existing water right, has the identification number been entered? N/A ☒ YES ☐ NO *
- 22. Should this claim be data entered? ☒ YES ☐ NO *

Claim checked by: ES Date: 9-20-89
Claim must be returned to claimant: (Yes) ☒ (No)
Claimant must be notified of modifications: (Yes) ☒ (No)

Receipt Prepared by: Date:
Claim data entered by: SR Date: 10-19-89 Checked by: MICROFILMED
Sent to claimant by: Date:

Comments: 4310- Coda as : 20 37E Sec. 34 NW 1/4 100 1/2
7- assumed - 004 (SR)