

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

1. Owner: Eric C. Farn & the Mervyn Hazzard Permit No. 65-12469
 Current Address: 3508 KUTCHAI St. Boise ID. Phone No. 344-1760
 2. Accompanied by: WILLIAM & LISA GOSSEL EXAM. DATE: 9-07-88
 Address: SARAH VALLEY ID Phone No. N/A
 Relationship to Permit Holder: WILLIAM - SHARE P/D
 3. Source: UNPAVED HWY 5 PERMIT to S. FOX PAVETTE RIVER

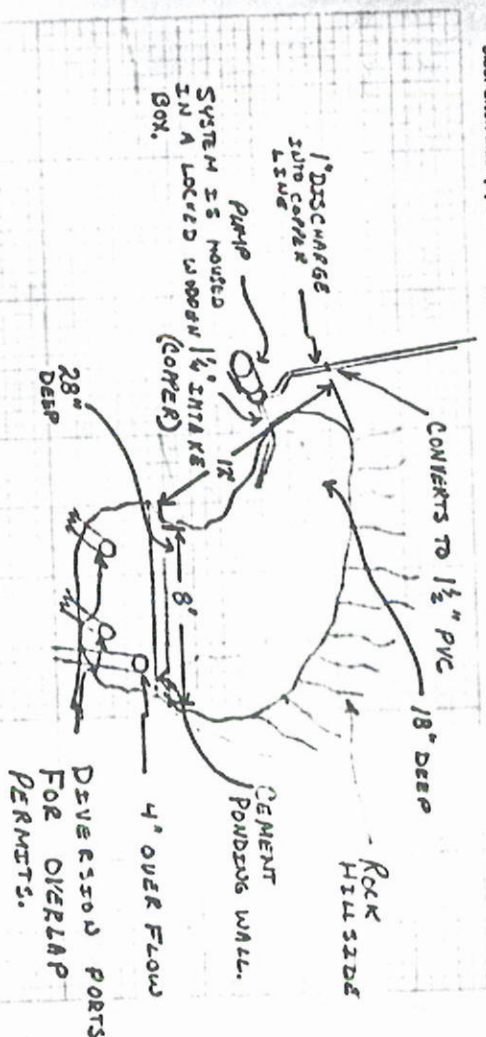
B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE ☐ Copies Attached

2. Other water rights with same point of diversion: 65-12469, 65-12775, DIVERSITY TRACT
PERMIT 65-12459 (THEY ARE NOT COPIES ATTACHED) ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. Diversion System Diagram: Indicate all major components and distances between components. Indicate well size/ditch size/pipe I.d. as applicable. ☐ Alternative diagram attached



Scale: 1" = 114 ft. SCALE

2. ☒ Copy of U.S.G.S. Quadrangle Attached ☐ Aerial Photo Attached
 Showing location(s) of point(s) of diversion and (required for irrigation of 10 acres or more).
☒ Photo of Diversion and System Attached
 (required for all but single household domestic groundwater, and stockwater).

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: **A65-12592**
Date Received: 4/19/1989
Receipt No: C006428
Received By: _____

**COPY FOR
YOUR FILES**

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

**COPY FOR
YOUR FILES**

1. Name: MARY F HAZELWORTH
Address: 3508 KOOTENAI ST
BOISE ID

208-344-1760

83705

2. Date of Priority: JAN 27, 1983

3. Source: SPRING

Trib. to: PAYETTE RIVER, SOUTH FORK

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
08N	05E	6		SW	SE	12	BOISE

5. Description of diverting works:

PUMP AT SPRING, PIPELINE TO PLACE OF USE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
HEATING	01/01	12/31	0.040		
DOMESTIC	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:

DOMESTIC, 1 HOME; HEATING, 1 HOME AND SWIMMING POOL

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
08N	05E	6	SW	SE	12	HEAT	
			SW	SE	12	DOMEST	

11. Place of use in counties: BOISE

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

13. Other Water Rights Used:
NONE

14. Remarks:

THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES
AND 134 DEGREES F.

NAME REMOVAL PER CLAIMANT REQUEST 2/23/2000. DB

15. Basis of Claim: PERMIT

**STATE OF IDAHO
IDAHO DEPARTMENT OF WATER RESOURCES**

NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

1. Water Right No(s).: 65-12592
Adjudication Claim No(s).: _____

2. The following REQUIRED information must be submitted with this form:
 - A. A copy of the most recent DEED, TITLE POLICY, CONTRACT OF SALE or other legal document indicating your ownership of the property and water rights or claims in question, WITH ATTACHED LEGAL DESCRIPTION.
AND
 - B. PLAT OF PROPERTY or SURVEY MAP for parcel of ten acres or less. (These are usually attached to your deed or on file with the county.)
OR
 - C. For water rights or adjudication claims involving ten or more irrigated acres, a USDA Farm Service Agency AERIAL PHOTO with irrigated acres outlined and point(s) of diversion clearly marked.

3. Name and Address of Former Owner/Claimant Mina C. Faris

4. New Owner/Claimant(s) Mary Hazelworth
Name Connector (Check one): ☐ and, ☐ or, ☐ and/or
New Mailing Address 3508 Koofenai street
City, State and ZIP Code Boise ID 83705
New Telephone Number (208) 344-1760

5. Date you acquired the property _____

6. If you have acquired only a portion of the former owner's property, IDWR may need to split the water right(s) or adjudication claim(s). If this applies, describe in detail your portion of each water right or adjudication claim in the spaces below. If necessary, attach additional pages.
Number of acres you irrigate 0 Number and type of stock 0
Diversion rate in CFS 0.01 Number of homes 1 Other uses _____
1,077 gal per hour
If a water right or adjudication claim is being split and you are not sure how to identify your portion of the original right or claim, please contact the nearest IDWR office for assistance.

7. Signature of New Owner or Claimant(s) Mary F. Hazelworth

(Corporations or other organizations must submit a list of directors and/or officers demonstrating authority to sign form.)

8. For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims..

INSTRUCTIONS

This form has been prepared to assist new owners of property to comply with the requirements of Sections 42-248 and 42-1409(6), Idaho Code. Section 42-248 requires certain property holders to notify the Department of Water Resources (IDWR) of any change in mailing address or ownership of all or part of a water right record on file with IDWR. Section 42-1409(6) provides that new property owners must notify IDWR of any change in ownership of a water right during an adjudication of water rights. Required claims may be filed by a new owner.

Separate brochures are available from IDWR describing the adjudication of water rights and the requirement to notify IDWR of changes in ownership. Please contact your nearest IDWR office, or call 1-800-451-4129, if you would like more information or need help completing this form. Please attach additional sheets to the form if you require additional space to describe or explain any of the items on the form.

1. If there are water rights associated with the property, the seller should be able to provide you with the water right or adjudication claim number(s). Please enter these number(s) at **Item 1**. If you or the seller believes there are water rights for the property but the numbers are unknown, you may wish to contact IDWR for assistance in identifying the water rights for the property in question. If claims for the rights are required, and have not been filed, IDWR will so advise you.
2. The information described at **Item 2** is required, since IDWR cannot process the requested change without documentation of ownership. The preferred types of documentation are shown; contact IDWR if you have difficulty obtaining this information. Do not obtain a new survey for purposes of this form before contacting IDWR.
3. Please provide the name and address of the former owner of the water right and/or adjudication claim at **Item 3**.
4. The name, mailing address, and telephone number of the new owner(s) is entered at **Item 4**. Please indicate the relationship between multiple owners by using the connector 'and', 'or', or 'and/or'. If an 'and' is used, all parties must sign this form. If an 'and/or' or 'or' is used, all parties may sign. However, only one of the named parties is required to sign.
5. At **Item 5**, please provide the date the property in question was acquired. This may be the date of "closing" in the case of a real estate transaction or the date of court order for other types of ownership changes.
6. You may be purchasing only a portion of the total water right held by the seller. This means the water right held by the seller may be "split" to provide your share of the right in question. Be sure to include a description of the portion of the water right you have purchased at **Item 6**.

Please provide as much detail as possible concerning your water right: include the number of homes, irrigated acreage if more than 1/2 acre is irrigated, type and number of stock if your right is for stockwater, etc. In the absence of information to the contrary, IDWR will assume the intent is to split the rights *proportionately*.

7. The new owner(s) must sign the form in the space(s) provided at **Item 7**. Corporations and other organizations must submit a list of directors or officers demonstrating the authority of the director or officer to sign the form.
8. There is no filing fee. When complete, you should retain a copy and return the original of the form to the IDWR office nearest you:

IDWR Western Region, 2735 Airport Way, Boise, ID 83705-5082 (208) 334-2190

IDWR Southern Region, 1341 Fillmore St. N., Twin Falls, ID 83301-3380 (208) 736-3033

IDWR Northern Region, 1910 Northwest Blvd., Suite 210, Coeur d'Alene, ID 83814-2615 (208) 769-1450

IDWR Eastern Region, 900 N. Skyline Dr., Suite A, Idaho Falls, ID 83402-1718 (208) 525-7161

CHANDLER, DILLION & ALLYN
CHARTERED
Attorneys

Thomas Chandler
Lee B. Dillion
Kathleen P. Allyn
Russell A. Comstock
Allan R. Bosch
C. A. Daw
Robert A. Wreggelsworth

325 West Idaho Street
Boise, Idaho 83702-6040
Telephone
(208) 344-8990
Telecopier
(208) 344-9140

October 22, 1992

Idaho State Tax Commission
Inheritance Tax Division
P.O. Box 36
Boise, Idaho 83707

Re: Estate of Mina Cordelia McCain Faris, deceased
Date of Death: July 13, 1992
CDA File No. 1283-EP01

Gentlemen:

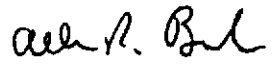
As attorneys for the above captioned estate, we wish to inform the Idaho State Tax Commission that the Mina Cordelia McCain Faris Estate has a value of approximately \$137,000 and as such no inheritance tax will be owing. For your information, Mina Cordelia McCain Faris's social security number is 519-01-0369.

Please send our office copies of any statements of assets furnished to you by banks or financial institutions concerning this estate.

Thank you for your continued assistance. If you have any questions, please contact me.

Sincerely,

CHANDLER, DILLION & ALLYN,
CHARTERED

By: 
Allan R. Bosch

pb
cc: Ms. Mary F. Hazelworth

GG 12

NO. _____ COPY _____
A.M. _____ P.M. _____

OCT - 8 1992

J. DAVID NAVARRO, Clerk
By LORRAINE SMITH
DEPUTY

3P-15373

PROBATE CASE NO. 3P-158
APPLICATION FOR INFORMAL
PROBATE OF WILL AND
APPOINTMENT OF PERSONAL
REPRESENTATIVE

1. Applicant's interest is that of a child of the decedent.
2. The person whose appointment as personal representative is sought is the Applicant.
3. The Applicant is qualified to act as such and has priority because there is no person with a higher or equal priority for appointment.
4. The person whose appointment as personal representative is sought has priority for appointment as the person nominated in, or pursuant to the exercise of a power conferred by, the decedent's will, Article I, Section 3.
5. The decedent died on July 13, 1992, at the age of 94 years.
6. Venue is proper because at the time of death the decedent was domiciled in this county.
7. The names and addresses of the children, heirs, and devisees of the decedent, and the ages of those who are

APPLICATION FOR INFORMAL PROBATE OF WILL AND
APPOINTMENT OF PERSONAL REPRESENTATIVE - 1

minors so far as known or ascertainable with reasonable diligence by applicant are:

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>
Mary F. Hazelworth	3508 Kootenai Boise, Idaho 83705	Daughter
Rochelle Hess	10488 S. Springdale Street Boise, Idaho 83704	Granddaughter
Donna Pohl	Route 2, Box 2373 Hermiston, Oregon 97838	Granddaughter
Sally Tondu	1919 Ram Court Nampa, Idaho 83651	Granddaughter

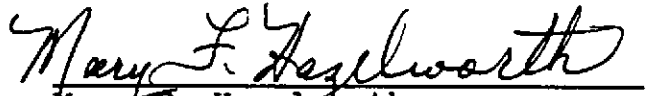
8. No personal representative has been appointed in this state or elsewhere whose appointment has not been terminated.
9. Applicant has neither received nor is aware of any demand for notice of any probate or appointment proceeding concerning the decedent that may have been filed in this state or elsewhere.
10. The time limit for informal probate and appointment has not expired because not more than three years have passed since the decedent's death.
11. The original of the decedent's will, dated May 22, 1981, and codicil to the decedent's will, dated July 28, 1983, accompanies this application. To the best of applicant's knowledge, neither that will and codicil nor any other will and codicil of the decedent has been the subject of a previous probate order.
12. The original death certificate of the decedent, dated July 15, 1992, accompanies this application.
13. Applicant believes that the Will and Codicil which are the subject of this application were validly executed.

14. Having exercised reasonable diligence, applicant is unaware of any instrument revoking the Will and Codicil which are the subject of this application and believes that such Will and Codicil are the decedent's last will and codicil.
15. To the best of applicant's knowledge, the will to which this application relates is not part of a known series of testamentary instruments (other than wills or codicils), the latest of which does not expressly revoke the former.
16. Bond is not required under I.C. 15-3-603.
17. An estimate of the total assets of the estate has been sent to the Idaho State Tax Commission.
18. Any required notice has been given or waived.

WHEREFORE, APPLICANT REQUESTS THAT:

1. The decedent's will, dated May 22, 1981, and Codicil, dated July 28, 1992, be informally probated.
2. Mary F. Hazelworth be informally appointed personal representative of the estate of the decedent, to act without bond.
3. Upon qualifications and acceptance, letters testamentary be issued.

DATED: _____


Mary F. Hazelworth
3508 Kootenai
Boise, Idaho 83705-2247
(208) 344-1760

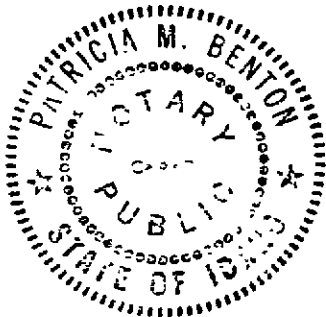
VERIFICATION

STATE OF IDAHO)
)
County of Ada) ss

Applicant, being sworn, says that the facts set forth in the foregoing application are true, accurate, and complete to the best of applicant's knowledge and belief.

Mary F. Hazelworth
Mary F. Hazelworth

SUBSCRIBED AND SWORN to before me this 23 day of October, 1992.



Patricia M. Benton
Notary Public for Idaho
Residing at Boise, Idaho
My Commission Expires: 6/4/98

CERTIFICATE OF SERVICE

I certify that on October 23, 1992, caused a true and correct copy of the foregoing document to be forwarded, by the method indicated below, to the following persons:

Rochelle Hess
10488 South Springdale Street
Boise, Idaho 83704

Hand Delivery _____
U.S. Mail ☒ _____
Fax _____
Fed. Express _____

Donna Pohl
Route 2, Box 2373
Hermiston, Oregon 97838

Hand Delivery _____
U.S. Mail ☒ _____
Fax _____
Fed. Express _____

Sally Tondur
1919 Ram Court
Nampa, Idaho 83651

Hand Delivery _____
U.S. Mail ☒ _____
Fax _____
Fed. Express _____

Allen R. Buhl

Last Will and Testament of

MINA CORDELIA FARIS

I, MINA CORDELIA FARIS, of Boise, Idaho, over the age of majority and being of sound and disposing mind and memory, and not acting under duress, menace, fraud or undue influence of any person whomsoever, do hereby make, publish and declare this to be my Last Will and Testament.

ARTICLE I

Section 1. I revoke all wills and codicils to wills by me heretofore made.

Section 2. I declare that I am a widow and that I have two children, ALBERT ROSS FARIS and MARY ELIZABETH FARIS HAZELWORTH, both adults.

Section 3. I appoint MARY ELIZABETH FARIS HAZELWORTH as Personal Representative of my estate, to serve without bond. In the event she predeceases me, or shall fail to qualify, resign or cease to act as such for any reason, I appoint LYNNE ROCHELLE HAZELWORTH as Personal Representative, to serve without bond.

Section 4. I authorize and empower my Personal Representative, if and whenever, in the settlement of my estate, my Personal Representative shall deem it advisable, to sell at private or public sale, at such price as my Personal Representative shall think fit, the whole or any part of my real or personal property, without the consent or intervention of any court, and to execute good and sufficient deeds or other instruments necessary or proper to convey and transfer the same to the purchasers, who shall not be bound to see the application of the purchase money.

Section 5. It is my intention that any estate tax due by reason of my death shall be paid from my residuary estate and not charged against the specific bequests made herein.

Section 6. To the extent that the division of my estate between my children is unequal, it is in recognition of the care and concern for my welfare during my lifetime by my daughter.

ARTICLE II

Section 1. I give, devise and bequeath all of my household furniture, furnishings, fixtures, dishes, silverware, clothing, books, organ, jewelry and generally all of my household and personal effects of every kind and character to my daughter, MARY ELIZABETH FARIS HAZELWORTH. If she does not survive me, I give the same to my granddaughter, LYNNE ROCHELLE HAZELWORTH.

Section 2. I hereby give, devise and bequeath to my daughter, MARY ELIZABETH FARIS HAZELWORTH, or her issue, the following described parcels of real property:

M.C.F.

PARCEL 1:

Commencing at a point 460 feet West of the South East Corner of Lot Sixty in Section 16, in Township 3 North of Range 2 East of the Boise Meridian, in Ada County, State of Idaho, on the South line of said Lot, the true place of beginning; thence North parallel with the East line of said Lot, 382 feet 6 inches; thence West and parallel with the South line of said Lot, 80 feet to a point; thence South and parallel with the East line of said Lot, 382 feet 6 inches to the South line of said Lot; thence East along the South line of said Lot to the point and place of beginning.

PARCEL 2:

Tract of land lying in Lot 12 in Section 6, T. 8 N., R. 5 E., Boise Meridian, Boise County, Idaho described as follows:

Beginning at the 1/4 corner common to Section 6 and 7, also being the Southwest corner of Lot 12; thence N. 49° 24' 43" E., a distance of 666.98 feet to a 5/8" rebar, being the REAL POINT OF BEGINNING; thence S. 86° 26' 52" E., a distance of 49.06 feet; thence N. 78° 59' 29" E., along the approximate centerline of a road, a distance of 99.51 feet; thence N. 66° 13' 45" E., along the approximate centerline of a road, a distance of 117.42 feet; thence N. 4° 19' 15" E. a distance of 102.56 feet to a point on the approximate waterline of the South Fork of Payette River; thence N. 82° 07' 46" W., along the waterline of said river a distance of 127.07 feet; thence N. 66° 46' 00" W., along the waterline of said river a distance of 65.30 feet; thence S. 19° 59' 46" W., a distance of 222.11 feet to THE REAL POINT OF BEGINNING.

and any interest I may have at the time of my death in shares of Investors Mutual Diversified Services, whether held in my name alone or in some other form.

Section 3. I give, devise and bequeath to my son, ALBERT ROSS FARIS, if he survives me, the savings accounts or time certificates in my name at Provident Federal Savings and Loan Association and all of my interest in and to the Nuveen Tax Exempt Bond Fund. If my son does not survive me, I give the same to my daughter, MARY ELIZABETH FARIS HAZELWORTH.

Section 4. All the rest, residue and remainder of my property and estate, of whatsoever kind or nature and wheresoever situate, of which I may die possessed or to which I may be entitled, or in which I may have an interest at the time of my death, including but not limited to any balance due on the real estate contract for sale of the following property:

M.C.F.

Lots 11 and 12, Section 6, T.8 N., R.5 E.,
B.M., Boise County, Idaho.

and

The West one-half of the Northeast one-
quarter and the Northwest one-quarter of the
Southeast one-quarter of Section 7, T.8 N.,
R.5 E., B.M. Boise County, Idaho

I give, devise and bequeath to my daughter, MARY ELIZABETH
FARIS HAZELWORTH, if she survives me; and if she does not sur-
vive me, I give the same to my granddaughter, LYNNE ROCHELLE
HAZELWORTH.

I, MINA CORDELIA FARIS, the Testatrix, sign my name to
this instrument this 22nd day of May, 1988, and
being first duly sworn, do hereby declare to the undersigned
authority that I sign and execute this instrument as my last
will and that I sign it willingly, that I execute it as my free
and voluntary act for the purposes therein expressed and that I
am over eighteen (18) years of age, of sound mind and under no
constraint or undue influence.

Mina Cordelia Faris
Testatrix

We, the undersigned witnesses, sign our names to this
instrument, being first duly sworn, and do hereby declare to
the undersigned authority that the Testatrix signs and executes
this instrument as her last will and that she signs it willingly,
and that each of us, in the presence and hearing of the
Testatrix, hereby signs this will as witness to the Testatrix'
signing, and that to the best of our knowledge the Testatrix is
over eighteen (18) years of age, of sound mind and under no
constraint or undue influence.

NO. _____ FILED _____
A.M. _____ P.M. _____

OCT - 8 1992

J. DAVID NAVARRO, Clerk
By LORRAINE SMITH
DEPUTY

STATE OF IDAHO)
County of Ada) ss.

J. Charles Blanton
Witness
Morgan W. Richards Jr.
Witness

SUBSCRIBED, SWORN TO and acknowledged before me by
MINA CORDELIA FARIS, the Testatrix, and subscribed and sworn
to before me by J. Charles Blanton and
Morgan Richards Jr., witnesses, this 22nd
day of May, 1988.

Shirley L. Spratt
NOTARY PUBLIC for Idaho
Residing at Boise, Idaho

CODICIL TO
LAST WILL AND TESTAMENT
OF

MINA CORDELIA FARIS

I, MINA CORDELIA FARIS, being of sound and disposing mind and memory and not acting under fraud, duress, coercion or undue influence of any person whomsoever, do hereby make, publish and declare this to be a Codicil to my Last Will and Testament dated May 22, 1981.

Article II, Section 3 is hereby amended to read as follows:

Section 3. I give, devise and bequeath to my son, ALBERT ROSS FARIS, if he survives me, all of my interest in and to the Nuveen Tax Exempt Fund. If my son does not survive me, I give the same to my daughter, MARY ELIZABETH FARIS HAZELWORTH.

In all other respects I republish my Last Will and Testament dated May 22, 1981, which shall remain in full force and effect.

I, MINA CORDELIA FARIS, the Testatrix, sign my name to this instrument this 28 day of July, 1983, and, being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as a codicil to my last will and that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed and that I am over eighteen (18) years of age, of sound mind and under no constraint or undue influence.

Mina C Faris
Testatrix

We, the undersigned witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the Testatrix signs and executes this instrument as a codicil to her last will and that she signs it willingly and that each of us, in the presence and hearing of the Testatrix, hereby signs this will as witness to the Testatrix' signing and that, to the best of our knowledge, the Testatrix is over eighteen (18) years of age, of sound mind and under no constraint or undue influence.

AM. P.M.

OCT - 8 1992

J. DAVID NAVARRO, Clerk
By LORRAINE SMITH,
STATE OF IDAHO) ss.
County of Ada)

Charles Blanton
Witness
Donald D. Saint-Just
Witness

SUBSCRIBED, SWORN TO and acknowledged before me by MINA CORDELIA FARIS, the Testatrix, and subscribed and sworn to before me by J. CHARLES BLANTON and DONALD D. SAINT JUST, witnesses, this 28th day of July, 1983.

Shirley D. Sprad
NOTARY PUBLIC for Idaho
Residing at Boise, Idaho

CODICIL

JUL 15 1992

State of Idaho
CERTIFICATE OF DEATHState File No. **3912**
Local Reg. No.

DECEDENT	NAME		MINA CORDELIA MCCAIN FARIS		SEX	Female	DATE OF BIRTH (Month, Day, Year)	July 13, 1992
	SOCIAL SECURITY NUMBER	AGE LAST BIRTHDAY (Year)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (Month, Day, Year)	BIRTHPLACE (City and State or Foreign Country)		
	519-01-0369	94			Oct. 6, 1897	Lacona, Iowa		
TYPE OF DEATH	WAS DECEDENT EVER IN U.S. ARMED FORCES?		PLACE OF DEATH (Check only one)		OTHER			
	☐ Yes ☒ No		(1) ☐ Inpatient (2) ☐ Outpatient (3) ☐ DOA		(4) ☐ Licensed Nursing Home (5) ☒ Private Residence (6) ☐ Licensed Shelter Home (7) ☐ Other (Specify)			
FACILITY NAME AND ADDRESS (If not a hospital, enter name of place, street and number)	3508 Kootenai St.		CITY/TOWN OR LOCATION OF DEATH		COUNTY OF DEATH			
	Boise		Boise		Ada			
MARRIAGE STATUS (Married, Never Married, Widowed, Divorced, Separated)	Widowed		DECEDENT'S USUAL OCCUPATION (Last and of work done during most of working life. Do not use retired.)		KIND OF BUSINESS / INDUSTRY			
			Bookkeeper/Homemaker		Own Home			
RESIDENCE STATE	COUNTY	CITY/TOWN OR LOCATION	STREET AND NUMBER		ZIP CODE			
	Idaho	Ada	Boise	3508 Kootenai St.	83705			
WAS DECEDENT OF HISPANIC ORIGIN? (Specify race or ethnicity)	WAS DECEDENT OF HISPANIC ORIGIN? (Specify race or ethnicity)		RACE (Specify race or ethnicity)		EDUCATION (Specify only highest grade completed)			
	☐ Yes ☒ No		White		Elementary/Secondary (K-12) College (1-4 or 5+)			
FATHER - NAME	BIRTHPLACE		MOTHER - FULL MAIDEN NAME		BIRTHPLACE			
	Hugh Johnson McCain		Tennessee		Elizabeth Catherine Thorn		Illinois	
INFORMANT	NAME (Last, first, middle)		MARRIAGE ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)		LOCATION - City or Town, State			
	Mary Hazelworth		3508 Kootenai St., Boise, Idaho		83705			
METHOD OF DISPOSITION	PLACE OF DISPOSITION (Place of entombment, crematory, or other place)		LOCATION - City or Town, State		LOCATION - City or Town, State			
	☒ Burial ☐ Donation ☐ Removal from Idaho		Morris Hill Cemetery		Boise, Idaho			
SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH	LICENSE NUMBER		NAME AND ADDRESS OF FACILITY		DATE SIGNED (Month, Day, Year)			
	Collin K. [Signature]		Alden-Waggoner Chapel, Boise, Idaho		July 13, 1992			
TIME OF DEATH	DATE (Month, Day, Year)		WAS CASE REFERRED TO CORONER?		MANNER OF DEATH (Check One)			
	10:00 a.m. July 13, 1992		☒ Yes ☐ No		☒ Natural ☐ Homicide ☐ Suicide ☐ Accident			
IMMEDIATE CAUSE (Final disease or condition resulting in death)	Sequently list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Cause of death) and injury (If injured events resulting in death) LAST		Sequently list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Cause of death) and injury (If injured events resulting in death) LAST		Approximate Interval Between Onset and Death			
	Congestive Heart Failure		Myocardial Infarction		3 months			
Sequently list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Cause of death) and injury (If injured events resulting in death) LAST	Coronary Arteriosclerosis				years			
					years			
27 PART 2. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part 1	WAS AN AUTOPSY PERFORMED?		WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH?					
	Heart Block - Permanent Premature		☐ Yes ☒ No		☐ Yes ☒ No			
CERTIFIER (Check only one)	PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated		CORONER - On the basis of examination and/or investigation in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner as stated					
	SIGNATURE AND TITLE OF CERTIFIER		LICENSE NUMBER		DATE SIGNED (Month, Day, Year)			
NAME AND ADDRESS OF CERTIFIER (If physician)	James W. Smith, M.D.		M 3660		July 13, 1992			
	287 W. Jefferson, Boise, Idaho							
DATE OF BIRTH (Month, Day, Year)	HOUR OF BIRTH		DESCRIBE HOW INJURY OCCURRED					
INJURY AT WORK?	IF TRANSPORTATION ACCIDENT, Specify		PLACE OF INJURY - In home, 8th fl. street factory, office building, etc. (Specify)		LOCATION (Street or Rural Route Number, City/Town, or County and State)			
	☐ Yes ☒ No		☐ Driver ☐ Passenger ☐ Pedestrian ☐ Other					
CORONER'S ACTION (Check One)	(1) ☐ Reviewed Only (2) ☐ Reviewed, Completed Items 28 and/or 30 (3) ☐ Reviewed, Amended and Certified		CORONER'S SIGNATURE		DATE SIGNED (Month, Day, Year)			
			[Signature]					
REGISTRAR	REGISTRAR'S SIGNATURE		DATE FILED (Month, Day, Year)					
	[Signature]		July 13 1992					

State of Idaho
County of Ada

THIS IS TO CERTIFY that this is a certified copy of a certificate filed with the Department of Health and Welfare under Title 39, Idaho Code.

JUL 15 1992
Date IssuedRichard W. Blair
State Registrar of Vital Statistics

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: A65-12592
Date Received: 4/19/1989
Receipt No: C006428
Received By: CA

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MARY F. HAZELWORTH 208-344-1760
Address: 3508 KOOTENAI ST.
BOISE, ID 83705
AND/OR
Name: MINA C. FARIS 208-344-1760
Address: 3508 KOOTENAI ST.
BOISE, ID 83705
2. Date of Priority: JAN 27, 1983
3. Source: SPRING Trib. to: PAYETTE RIVER, SOUTH FORK
4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
08N	05E	6	SW	SE		12	BOISE
5. Description of diverting works:
PUMP AT SPRING, PIPELINE TO PLACE OF USE
6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
HEATING	01/01	12/31	0.040		
DOMESTIC	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:
DOMESTIC, 1 HOME; HEATING, 1 HOME AND SWIMMING POOL

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
08N	05E	6	SW	SE	12	HEAT	
			SW	SE	12	DOMEST	

11. Place of use in counties: BOISE

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

13. Other Water Rights Used:
NONE

14. Remarks:
THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES
AND 134 DEGREES F.

15. Basis of Claim: PERMIT

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: - 0 -

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): Mary L. Hazelworth Date: 4/19/89
Date: _____

State of Idaho)
County of Ada) SS.
Boise)

Subscribed and sworn (or affirmed) before me this 19th day
of April 19 89 Carter Futchler
Notary Public

Seal

Residing at _____

My Commission Expires _____

Carter Futchler, Notary Public
Boise, Idaho
My Commission Expires March 21, 1994

AJ0749NP
No. R65-12592

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 02/23/00
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MARY F HAZELWORTH 3508 KOOTENAI ST BOISE ID 83705 (208) 344-1760	01/27/1983	DOMESTIC	01-01 12-31	0.040 CFS	1.20 AFA
TOTAL DIVERSION:					0.040 CFS	1.20 AFA

Water Source: SPRING

Tributary to: PAYETTE RIVER, SOUTH FORK

Stage: LICENSE

Point(s) of Diversion: T08N R05E S06 Lot12(SWSE)

BOISE County

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:			
08N	05E	6	:																	:			
																12-D							

POU County: BOISE

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Other Water Rights with Same Point(s) of Diversion with Stage (Includes All Sources):
65-12660 A65-10378 A65-12592 A65-12775 R65-10378 R65-12775

Other Water Rights Listing Overlapping Place(s) of Use:
A65-10377 R65-10377 R65-10378

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.
- C18 - 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.

Remarks: EXP THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES AND 134 DEGREES F.

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number: 65

Field Inspection Flag:
Presumption Flag:

AJ0749NP
No. R65-12592

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 02/23/00
PAGE: 2

=====

Comments: Date: 02/01/2000 User-ID: AJU10-JS Subject: AJU10 CONDITION UPDATE
CONDITION CODE(S) C18 ADDED IF NOT ALREADY PART
OF RECORD THRU AJU10.

Date: 02/23/2000 User-ID: DBUFFING Subject: NAME REMOVAL
THE DATA IN THE NAME FIELD WAS CHANGED TO SHOW THE REMOVAL OF ONE
OF THE CLAIMANTS, PER CLAIMANT REQUEST.

Audit: 02/23/00 DBUFFING

AJ0749NP
No. R65-12592

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 11/19/99
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MARY F HAZELWORTH 3508 KOOTENAI ST BOISE ID 83705 (208) 344-1760	01/27/1983	DOMESTIC	01-01 12-31	0.040 CFS	
TOTAL DIVERSION:					0.040 CFS	1.20 AFA

C MINA C FARIS
3508 KOOTENAI ST
BOISE ID 83705
(208) 344-1760

Water Source: SPRING

Tributary to: PAYETTE RIVER, SOUTH FORK

Stage: LICENSE

Point(s) of Diversion: T08N R05E S06 Lot12(SWSE)

BOISE County

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:			
08N	05E	6	:																	:			
																12-D							

POU County: BOISE

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES AND 134 DEGREES F.

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number: 65

Field Inspection Flag:
Presumption Flag:

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 65-12592

Priority: January 27, 1983

Maximum Diversion Rate:

0.04 CFS

Maximum Diversion Volume:

1.2 AF

This is to certify, that MARY P. HAZELNORTH
MINA C. FARIS

3508 KOOTENAI ST.
BOISE, ID 83705

has complied with the terms and conditions
of the permit, issued pursuant to Application for Permit dated January 27, 1983; and
has submitted Proof of Beneficial Use on March 1, 1988. An examination indicates
that the works have a diversion capacity of .050 cfs of water from:

SPRING

tributary to PAYETTE RIVER, SOUTH FORK

source, and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.04 CFS	1.2 AF

LOCATION OF POINT(S) OF DIVERSION: LOT 12(SWSE), Sec. 6, Township 08N, Range 05E
BOISE County

PLACE OF USE: DOMESTIC

TOWN RGE SEC

08N 05E 6 LOT 12(SWSE)

CONDITIONS/REMARKS:

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. Use of water under this water right is subject to control by the watermaster of State Water District No. 65
6. Domestic use is for 1 home.

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

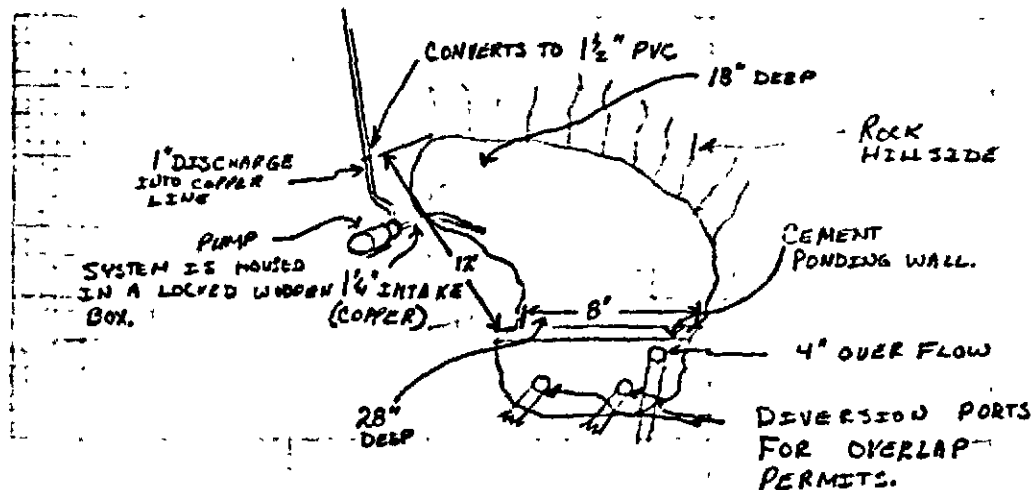
1. Owner: ELLA S. FARR & OR MADUE HAZELWORTH Permit No. 65-12598
Current Address: 3509 KONTAKI ST. BOISE, ID. 83705 Phone No. 344-1760
2. Accompanied by: WILLIAM WALLACE & JIMMY GOLLER EXAM. DATE: 9-27-88
Address: GARDEN VALLEY, ID Phone No. N/A
Relationship to Permit Holder: NEIGHBOR - SHARE P/D
3. Source: UNPAVED HOT SPRING tributary to S. FORK PAYETTE RIVER

B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE ☐ Copies Attached
2. Other water rights with same point of diversion: 65-12469, 65-12775 DOMESTIC PLANTS THAT
REPAIR WITH 65-12459 (THEY ARE WITH SAME SYSTEM) ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. Diversion System Diagram: Indicate all major components and distances between components. Indicate weir size/ditch size/pipe I.D. as applicable. ☐ Alternative diagram attached



Scale: 1" = 10' H. SCALE

2. ☒ Copy of U.S.G.S. Quadangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required). ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).
☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater).

DATE: 03/25/99
PAGE: 1

Audit: 03/11/88 04/30/88 CONVERT 09/15/88 GARRETT 02/13/90 REVU
03/19/90 CURTIS

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

11:13:36
03/25/99

PAGE: 1
GENERAL INFORMATION

49
CLAIM NUMBER: A65-12592

LAST: HAZELWORTH FIRST: MARY F
ADDRESS: 3508 KOOTENAI ST
CITY: BOISE STATE: ID ZIP: 83705
PHONE NUMBER: 208-344-1760

OWNER CODE: C

LAST: FARIS FIRST: MINA C
ADDRESS: 3508 KOOTENAI ST
CITY: BOISE STATE: ID ZIP: 83705
PHONE NUMBER: 208-344-1760

OWNER CODE: C

FIELD EXAM REQUIRED? FIELD
VERIFICATION REQUIRED DUE TO REMARKS? DATABASE EXAMINER
Y Y() N()

CLAIM REMARKS: GEN THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES
AND 134 DEGREES F.

FIELD EXAMINATION INFORMATION

CONTACT PERSON: _____ PHONE NUMBER: () -

DATE OF FIELD EXAM: __/__/__ APPOINTMENT MADE: Y() N() TIME: __:__ A() P()

ACCOMPANIED BY: _____ PHONE NUMBER: () -

RELATIONSHIP TO CLAIMANT: _____

DIRECTIONS TO PROPERTY / NOTES:

A. AJ CLAIM: # A65-12592 PRIORITY DATE: 01-27-1983 STAGE: P

B. WR RECORD: # 65-12592 PRIORITY DATE: 01-27-1983 STAGE: L

C. CAN THE PRIORITY DATE CLAIMED BE CONFIRMED BY A DECREE OR LICENSE? Y(☒) N(☐)

D. HAS THERE BEEN A LATER COURT DECREE OF THE WATER RIGHT(S) FROM THIS WATER SOURCE? Y(☐) N(☒)

E. IS THERE ANY INDICATION THAT THERE HAS BEEN A FIVE YEAR PERIOD OF CONTINUOUS NONUSE?
(IF YES, DESCRIBE BELOW) Y(☐) N(☒)

F. IF THIS CLAIM IS BASED ON A PERMIT, WHERE IS THE PERMIT IN THE LICENSING PROCESS?

PROOF OF BENEFICIAL USE SUBMITTED N/A(☐) Y(☐) N(☐)

FIELD EXAM COMPLETED N/A(☐) Y(☐) N(☐)

FIELD EXAM SENT TO STATE OFFICE N/A(☐) Y(☐) N(☐)

LICENSE ISSUED N/A(☐) Y(☐) N(☐)

* IF THE PERMIT WILL NOT BE LICENSED PRIOR TO THE DIRECTOR'S REPORT,
USE CONDITION CODE A01 AND RECOMMEND AS PERMITTED.

G. IF THIS CLAIM IS BASED ON BENEFICIAL USE, IS ADDITIONAL EVIDENCE
OF THE PRIORITY DATE REQUIRED? N/A(☐) Y(☐) N(☐)

* FOR CLAIMS BASED ON BENEFICIAL USE, DESCRIBE THE EVIDENCE OF PRIORITY SUBMITTED,
INCLUDING THE ANALYSIS OF THE EVIDENCE.

H. IS THE STAGE OF THE CLAIM CODED CORRECTLY? Y(☐) N(☒)

NOTES: changed to license

=====

RECOMMENDED PRIORITY DATE:

REVIEWED BY SDH

DATE 3-31-99

A. AJ CLAIM POINT OF DIVERSION AND SOURCE:

RIGHT	TWP. RGE.	SEC.	1/4	1/4	1/4	LOT	POD FLAG	COUNTY	DIVERSION NAME	DIVERSION NUMBER
A65-12592	08N 05E	6		SW	SE	12		BOISE		

OTHER AJ CLAIMS WITH SAME AJ POD
A PREFIX R PREFIX
NONE NONE

WR RECORDS IN SAME 40 ACRE TRACT

65-12469
65-12495
65-12775
65-13705

SOURCE: SPRING

TRIB: PAYETTE RIVER, SOUTH FORK

B. WR POINT OF DIVERSION AND SOURCE:

RIGHT	TWP. RGE.	SEC.	1/4	1/4	1/4	LOT	POD FLAG	COUNTY	DIVERSION NAME	DIVERSION NUMBER
65-12592	08N 05E	6		SW	SE	12		BOISE		

OTHER WR RECORDS WITH SAME WR POD

AJ CLAIMS IN SAME 40 ACRE TRACT
A PREFIX R PREFIX

65-12469
65-12495
65-12775
65-13705

NONE NONE

SOURCE: SPRING

TRIB: PAYETTE RIVER, SOUTH FORK

C. IS THE CLAIMED POD WITHIN THE SAME 40 ACRE TRACT THAT IS DESCRIBED IN THE WATER RIGHT FILE? N/A() Y(☒) N()

* IF NO, AND IF THE CHANGE IS VERIFIED AS AN ACCOMPLISHED CHANGE IN POD, DESCRIBE THE INJURY
ANALYSIS PERFORMED AND ENTER FLAG "C" WITH THE APPROPRIATE EXPLANATORY CODE.

D. CAN THE CLAIMED POD BE VERIFIED USING THE WATER RIGHT FILE OR GPS DATA? N/A() Y(☒) N()

E. SHOULD THE CLAIMED POD BE VERIFIED BY FIELD EXAM? Y() N(☒)

F. IS THE CLAIMED SOURCE THE SAME AS DESCRIBED IN THE WATER RIGHT FILE? N/A() Y(☒) N()

* IF NO, AND IF THE CHANGE IS VERIFIED AS AN ACCOMPLISHED CHANGE IN SOURCE, DESCRIBE THE INJURY
ANALYSIS PERFORMED AND ENTER FLAG "C" WITH THE APPROPRIATE EXPLANATORY CODE.

G. CAN THE CLAIMED SOURCE BE VERIFIED USING THE WATER RIGHT FILE? Y(☒) N()

H. SHOULD THE CLAIMED SOURCE BE VERIFIED BY FIELD EXAM? Y() N(☒)

I. HOW WAS THE POD AND SOURCE VERIFIED?

LICENSING FIELD EXAM (DATE OF FIELD EXAM 9/7/88) Y(☒) N(☐)

AJ FIELD EXAM (DATE OF FIELD EXAM _____ NAME OF EXAMINER _____) Y(☐) N(☐)

OTHER (DESCRIBE IN NOTES BELOW)

NOTES: _____

RECOMMENDED POINT(S) OF DIVERSION AND SOURCE: CHECK HERE IF RECOMMENDED AS CLAIMED (☒)

TWP. 08N	RGE. 05E	SEC. 6	1/4	1/4 SW	1/4 SE	LOT 12	POD FLAG	COUNTY BOISE	DIVERSION NAME	DIVERSION NBR
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

SOURCE: SPRING

TRIB: PAYETTE RIVER, SOUTH FORK

REVIEWED BY: SVH

DATE: 3-31-99

SYSTEM DESCRIPTION: DESCRIBED BELOW (☐) , SEE LICENSE FILE (☒) , OR SEE ATTACHMENT (☐)

A. ROOT WATER RIGHT NUMBERS: A65-12592

B. POJ LISTING

TWP	RNG	SEC	1/4	1/4	LOT	NAME	AJ #/ACRES	WR #/ACRES	LANDSAT DATA	FIELD EXAM.	RECOMM. ACRES
08N	05E	6	SW	SE	12	HAZELWORTH, MARY F	A65-12592 /	65-12592 /			
			SW	SE		GOLLER, JAMES A	A65-10378 / 2.0	65-10378 / 2.0			
			SW	SE		GOLLER, JAMES A	A65-10379 /	65-10379 /			
			SW	SE		GOLLER, JAMES A	65-10379 /	- /			
			SW	SE		USFS	65-12660 /	- /			
			SW	SE	12	GOLLER, JAMES A	A65-10377 / 13.0	65-10377 / 13.0			
			SW	SE	12	MOON, RICHARD C		65-12469 /			
			SW	SE	12	SOUTH FORK RANCH HOMEOWNERS AS		65-12495 /			
			SW	SE	12	WALLACE, HUGH E.		65-12775 /			
			SW	SE	12	HAZELWORTH, MARY F		65-13705 /			
08N	05E	6	SW	SE	12	HAZELWORTH, MARY F	A65-12592 /	65-12592 /			
			SW	SE		GOLLER, JAMES A	A65-10378 / 2.0	65-10378 / 2.0			
			SW	SE		GOLLER, JAMES A	A65-10379 /	65-10379 /			
			SW	SE		GOLLER, JAMES A	65-10379 /	- /			
			SW	SE		USFS	65-12660 /	- /			
			SW	SE	12	GOLLER, JAMES A	A65-10377 / 13.0	65-10377 / 13.0			
			SW	SE	12	MOON, RICHARD C		65-12469 /			
			SW	SE	12	SOUTH FORK RANCH HOMEOWNERS AS		65-12495 /			
			SW	SE	12	WALLACE, HUGH E.		65-12775 /			
			SW	SE	12	HAZELWORTH, MARY F		65-13705 /			

ADDITIONAL POJ FOUND

TOTAL ACRES A65-12592

POJ COUNTY: BOISE

C. IS WATER USAGE FOUND IN TRACTS OTHER THAN THOSE CLAIMED?

Y() N(☒)

* IF YES, ARE THESE TRACTS LISTED ABOVE (), OR ARE THEY LISTED ON AN ATTACHED SHEET ()

LIST OF ALL RIGHTS WITH A SAME POU AND IRRIGATION USAGE

CLAIM NO.	SOURCE	NAME	DIV. RATE	DIV. RATE/ACRE	DIV. VOL.	DIV. VOL./ACRE
A65-10377	HORN CREEK	GOLLER, JAMES A	0.420	0.021	0.20	0.01
A65-10378	SPRING	GOLLER, JAMES A	0.120	0.060		

LIST ALL RIGHTS WITH SAME POU BUT NOT USED FOR IRRIGATION.

CLAIM NO.	PURPOSES	NAME	MONTH/DAY	RATE	VOLUME
A65-12592	HEATING	HAZELWORTH, MARY F	FROM 01-01 TO 12-31	0.040 CFS	
A65-12592	DOMESTIC	HAZELWORTH, MARY F	FROM 01-01 TO 12-31	0.040 CFS	
A65-10379	DOMESTIC	GOLLER, JAMES A	FROM 01-01 TO 12-31	0.040 CFS	1.20 AF/A
65-10379	DOMESTIC	GOLLER, JAMES A	FROM 01-01 TO 12-31	0.040 CFS	1.20 AF/A
65-12660	DOMESTIC	USFS	FROM 05-01 TO 10-31	0.020 CFS	1.20 AF/A

D. ARE OTHER WATER RIGHTS USED FOR THE SAME PURPOSE?

Y(☒) N()

* IF YES, COMPLETE OVERLAP REVIEW:

OTHER RIGHTS LISTED IN CLAIM: NONE

E. IS THE CLAIMED POU THE SAME AS DESCRIBED IN THE WATER RIGHT FILE?

N/A() Y(☒) N()

* IF NO, AND IF THE CHANGE IS VERIFIED AS AN ACCOMPLISHED CHANGE IN POU, DESCRIBE THE INJURY ANALYSIS PERFORMED AND ENTER FLAG "C" WITH THE APPROPRIATE EXPLANATORY CODE.

F. CAN THE CLAIMED POU BE VERIFIED USING THE WATER RIGHT FILE AND AVAILABLE AERIAL PHOTOS?

N/A() Y(☒) N()

G. SHOULD THE CLAIMED POU BE VERIFIED BY FIELD EXAM?

Y() N(☒)

H. IS THERE ANY INDICATION THAT THERE HAS BEEN A FIVE YEAR PERIOD OF CONTINUOUS NONUSE OF THIS RIGHT, OR ANY PORTION OF THIS RIGHT?

Y() N(☒)

NOTES:

TOTAL ACRES: _____ N/A()
REVIEWED BY: SVH DATE: 3-31-99

A. AJ CLAIMED USES:

PURPOSE OF USE	PERIOD OF USE (MONTH/DAY)	DIV. RATE FOR EACH USE	DIV. VOL. FOR EACH USE
A65-12592 HEATING	FROM 01-01 TO 12-31	0.040 CFS	
A65-12592 DOMESTIC	FROM 01-01 TO 12-31	0.040 CFS	
TOTAL DIVERSION RATE/VOLUME		0.040 CFS	

B. WR RECORDED USES:

PURPOSE OF USE	PERIOD OF USE (MONTH/DAY)	DIV. RATE FOR EACH USE	DIV. VOL. FOR EACH USE
65-12592 DOMESTIC	FROM 01-01 TO 12-31	0.040 CFS	1.20 AF/A
TOTAL DIVERSION RATE/VOLUME		0.040 CFS	1.20 AF/A

C. DOES THE CLAIMED PURPOSE OF USE CORRECTLY DESCRIBE THE WATER USE?

Y() N(☒)

D. IS THE CLAIMED PURPOSE OF USE THE SAME AS DESCRIBED IN THE WATER RIGHT FILE?

N/A() Y() N(☒)

* IF NO, AND IF THE ACTUAL WATER USE IS VERIFIED AS AN ACCOMPLISHED CHANGE IN PURPOSE OF USE, DESCRIBE THE INJURY ANALYSIS PERFORMED AND ENTER FLAG "C" WITH THE APPROPRIATE EXPLANATORY CODE.

E. SHOULD THE CLAIMED PURPOSE OF USE BE VERIFIED BY FIELD EXAM?

Y() N(☒)

F. DOES THE CLAIMED PERIOD OF USE CONFORM TO IDWR STANDARDS?

Y(☒) N()

G. SHOULD THE PERIOD OF USE BE RECOMMENDED TO IDWR STANDARDS?

Y(☒) N()

* IF THE RECOMMENDED PERIOD OF USE IS DIFFERENT THAN IDWR STANDARDS, EXPLAIN IN NOTES BELOW.

H. IS THE CLAIMED DIVERSION RATE FOR EACH USE THE SAME AS DESCRIBED IN THE WATER RIGHT FILE?

N/A() Y(☒) N()

* IF NO, DESCRIBE IN NOTES BELOW HOW THE RECOMMENDED DIVERSION RATE FOR EACH USE WAS DETERMINED.

I. SHOULD THE CLAIMED DIVERSION RATE FOR EACH USE BE VERIFIED BY FIELD EXAM?

N/A() Y() N(☒)

J. IS THE CLAIMED DIVERSION VOLUME FOR EACH USE THE SAME AS DESCRIBED IN THE WATER RIGHT FILE?

N/A() Y() N(☒)

* IF NO, DESCRIBE IN NOTES BELOW HOW THE RECOMMENDED DIVERSION VOLUME FOR EACH USE WAS DETERMINED.

K. SHOULD THE CLAIMED DIVERSION VOLUME FOR EACH USE BE VERIFIED BY FIELD EXAM?

N/A() Y() N(☒)

NOTES:

add volume to AT

AJ CLAIM TOTAL DIVERSION RATE: 0.040 CFS

WR ROOT RIGHT TOTAL DIVERSION RATE: 0.040 CFS

A. IS THE CLAIMED TOTAL DIVERSION RATE THE SAME AS DESCRIBED IN THE WATER RIGHT FILE? N/A() Y(☒) N()

B. CAN THE CLAIMED TOTAL DIVERSION RATE BE VERIFIED USING THE WATER RIGHT FILE? N/A() Y(☒) N()

* ALL CLAIMS BASED ON BENEFICIAL USE (INCLUDING POSTED NOTICES AND STATUTORY CLAIMS) REQUIRE A FLOW MEASUREMENT.

C. IS THERE ANY INDICATION THAT THERE HAS BEEN A FIVE YEAR PERIOD OF CONTINUOUS NONUSE OF THIS RIGHT, OR ANY PORTION OF THE DIVERSION RATE? Y() N(☒)

* IF AN AMOUNT SMALLER THAN THE ORIGINAL DIVERSION RATE IS CLAIMED AND A FIELD EXAM IS NOT REQUIRED, EXPLAIN IN NOTES.

D. SHOULD THE CLAIMED DIVERSION RATE BE VERIFIED BY FIELD EXAM? Y() N(☒)

E. FLOW MEASUREMENT

MEASUREMENT METHOD _____, SEE ATTACHED CALCULATIONS.

F. RATE/VOLUME CALCULATIONS: (IRRIGATION)

1a. IRRIGATION RATE
ACRES _____ x 0.02 CFS/ACRE = _____ CFS
(Taken from pou review)

1b. CALCULATIONS

IS A DIVERSION RATE PER ACRE GREATER THAN 0.02 CFS/ACRE CLAIMED? Y() N()

IF YES, IS AN ADDITIONAL WATER USE FORM FILED AND ATTACHED? Y() N()

2. IRRIGATION DIVERSION VOLUME

CLAIMED DIVERSION VOLUME = _____ AF/A

ACRES _____ x DIVERSION VOL. AF/A FOR AREA _____ =

TOTAL DIVERSION VOLUME _____ AF/A

3. IRRIGATION CONSUMPTIVE USE

CLAIMED CONSUMPTIVE USE = _____ AF/A

ACRES _____ x CONSUMPTIVE VOL. AF/A FOR AREA _____ =

TOTAL CONSUMPTIVE USE _____ AF/A

4. CALCULATIONS FOR USES OTHER THAN IRRIGATION: SEE BELOW () OR SEE ATTACHMENT ()

NOTES:

licensed for Domestic only
Recorded as licensed

WR RECORD CONDITIONS/REMARKS:

- R04 - Use of water under this water right will be regulated by the
- watermaster of State Water District No. 65.

RECOMMENDATIONS: CHECK HERE IF RECOMMENDED AS CLAIMED (___)

REC. PURPOSE OF USE	REC. PERIOD		REC. DIV		REC. DIV		REC. CONS.	
	FROM	TO	RATE	CFS	VOL.	AF/A	USE	
			DATABASE	EXAMINER	DATABASE	EXAMINER	DATABASE	EXAMINER
~~HEATING~~	~~01-01~~	~~12-31~~	~~0.040~~	_____			0.0	_____
DOMESTIC	01-01	12-31	0.040	_____	1.2	_____	0.0	_____
_____	_____	_____		_____				_____
_____	_____	_____		_____				_____
_____	_____	_____		_____				_____
_____	_____	_____		_____				_____
TOTAL FOR THIS RIGHT				_____				_____

NON-IRRIGATION USES CLAIMED: DOMESTIC, 1 HOME; HEATING, 1 HOME AND SWIMMING POOL

NON-IRRIGATION USES RECOMMENDED: CHECK HERE IF RECOMMENDED AS CLAIMED (___)

REVIEWED BY: SVH

DATE: 3-31-99

FLAG: _____

STANDARD CONDITIONS (CODE): _____

STANDARD REMARKS (CODE): _____

EXPLANATORY CONDITIONS (CODE): _____

EXPLANATORY REMARKS (CODE): _____

A. CHECK ONLY THE FOLLOWING THAT APPLY:

	ACCEPTED AS CLAIMED	NEEDS REVIEW
OWNERSHIP _____	()	()
FORFEIT/ABANDON _____	()	()
ADDITIONAL DIV. AMOUNT _____	()	()

B. SPLIT WATER RIGHT REVIEW

ROOT WATER RIGHT NUMBER: 65-12592

TOTAL DIVERSION RATE OF WR SPLITS	DATABASE 0.040	EXAMINER _____	CFS
-----------------------------------	-------------------	-------------------	-----

SPLITS:

OLD RIGHT NUMBERS	CURRENT CLAIM NUMBERS	DIVERSION RATE	CURRENT "R" CLAIM NUM.	"R" DIV. RATE	WR RIGHT NUMBERS	DIVERSION RATE
-	A65-12592	0.040	-		65-12592	0.040
TOTAL CFS		0.040				0.040

DIVERSION RATE REVIEW

DO THE SUM CFS RATE OF THE SPLITS EQUAL THE ROOT RIGHT CFS RATE? (Y/N)
IF NO, IS THE WRITTEN REVIEW DESCRIBED BELOW () OR SEE ATTACHMENT ()?

DATABASE	FIELD EXAMINER
Y	Y() N()

NOTES:

AUTHENTICATION:

SIGNATURE: _____ DATE: _____

NAME OF FIELD EXAMINER: _____ TITLE: _____

MAPS AND AERIAL PHOTOGRAPHS USED TO REVIEW THIS NOTICE OF CLAIM TO A WATER RIGHT

TYPE OF MAP OR PHOTOGRAPH (CHECK IF USED)	IF USED, SUPPLY APPROPRIATE DATE AND OTHER INFORMATION	COPY INCLUDED IN FILE?
() ORTHOPHOTOQUAD	DATE OF PHOTO _____ IDWR ID NO. _____	Y() N()
() TOPOGRAPHIC	DATE FIELD CHECKED _____ IDWR ID NO. _____	Y() N()
() NAPP	DATE OF PHOTO _____ IDWR ID NO. _____	Y() N()
() ASCS AERIAL PHOTO	DATE OF PHOTO _____	Y() N()
() ASCS COLOR SLIDE	DATE OF PHOTO _____	Y() N()
() BLM OR USFS AERIAL PHOTO	DATE OF PHOTO _____	Y() N()
() TOWNSHIP SURVEY (GOVERNMENT PLAT)	DATE OF SURVEY _____	Y() N()
() SCS SOIL SURVEY MAP	DATE ISSUED _____	Y() N()
() SUBDIVISION PLAT MAP	DATE OF MAP _____	Y() N()
() OTHER _____	DATE _____	Y() N()
() OTHER _____	DATE _____	Y() N()
() OTHER _____	DATE _____	Y() N()

LIST OF ATTACHMENTS (CHECK IF ATTACHED)	IF ATTACHED, SUPPLY APPROPRIATE INFORMATION	NO. OF PAGES	NOTES
() LICENSING FIELD EXAM	DATE OF FIELD EXAM _____	_____	_____
() WATER RIGHT LICENSE	DATE LICENSE SIGNED _____	_____	_____
() IDWR APPROVED TRANSFER	DATE TRANSFER APPROVED _____	_____	_____
() SYSTEM DESCRIPTION	DATE DRAWN _____	_____	_____
() PHOTOGRAPHS	DATE(S) PHOTOS TAKEN _____	_____	_____
() SPLIT RIGHT REVIEW	DATE REVIEW COMPLETED _____	_____	_____
() HUBBLE ANALYSIS	DATE ANALYSIS COMPLETED _____	_____	_____
() CONVEYANCE LOSS ANALYSIS	DATE ANALYSIS COMPLETED _____	_____	_____
() FLOW MEASUREMENT CALCULATIONS	DATE SYSTEM MEASURED _____	_____	_____
() OTHER _____	DATE _____	_____	_____
() OTHER _____	DATE _____	_____	_____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

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03/25/99

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QUICKLOOK INFORMATION

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CLAIM NUMBER: A65-12592

WR ELEMENT	DATA DISCREPANCY Y/N	CORRESPONDENCE SENT/RECEIVED BY WHOM/DATE	FIELD EXAM BY WHOM/DATE	CHANGE CLAIM Y/N	ELEMENT DOCUMENTED WHOM/DATE	COMPLETED REVIEW WHOM/DATE	COMPLETED DATA ENTRY WHOM/DATE	VERIFIED DATE WHOM/DATE
PRIORITY DATE	Y							
POINT OF DIV								
SOURCE								
PLACE OF USE	Y							
DIV. AMOUNT CFS/VOLUME	Y							
CONSUMPTIVE USE	-							
PURPOSES OF USE	Y							
PERIOD OF USE	Y							
BASIS OF CLAIM								
REMARKS	Y							

BARCODE UPDATED
WHOM/DATE

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

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03/25/99
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PROFILE REPORT

CLAIM NUMBER: A65-12592

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MARY F HAZELWORTH	01/27/1983	HEATING	01-01 12-31	0.04 CFS	
C	MINA C FARIS		DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: SPRING

Tributary to: PAYETTE RIVER, SOUTH FORK

Stage: PERMIT

Point(s) of Diversion:

T08N R05E S06 Lot12(SWSE)

BOISE County

Place of use Legal Description for: HEATING

				NE				NW				SW				SE					
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac
08N	05E	6	:																		
			:																		

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE					
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac
08N	05E	6	:																		
			:																		

POU County: BOISE

Non-Irrigation Uses: DOMESTIC, 1 HOME; HEATING, 1 HOME AND SWIMMING POOL

Other Rights: NONE

Conditions of Approval:

Remarks: GEN THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES
AND 134 DEGREES F.

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number: 65

Field Inspection Flag:

Presumption Flag:

AJ5809NP
No. R65-12592

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 01/13/00
PAGE: 101

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MINA C FARIS 3508 KOOTENAI ST BOISE ID 83705 (208) 344-1760	01/27/1983	DOMESTIC	01-01 12-31	0.040 CFS	
TOTAL DIVERSION:					0.040 CFS	1.20 AFA

C MARY F HAZELWORTH
3508 KOOTENAI ST
BOISE ID 83705
(208) 344-1760

Water Source: SPRING

Tributary to: PAYETTE RIVER, SOUTH FORK

Stage: LICENSE

Point(s) of Diversion: T08N R05E S06 Lot12(SWSE)

BOISE County

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:			
08N	05E	6	:																	:			
																12-D							

POU County: BOISE

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP THE WATER TEMPERATURE OF THE SPRING VARIES BETWEEN 124 DEGREES AND 134 DEGREES F.

Dates: Exam Made Date: Verified Date: Objection Filed Date:

Misc: Water District Number: 65 Field Inspection Flag: Presumption Flag:

Audit: 03/31/99 SVANHOFF 11/19/99 SVANHOFF

*added
1.2 AFA
(in water
uses)*

AJ5809NP
No. R65-12592

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 01/28/00
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OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MINA C FARIS 3508 KOOTENAI ST BOISE ID 83705 (208) 344-1760	01/27/1983	DOMESTIC	01-01 12-31	0.040 CFS	1.20 AFA
TOTAL DIVERSION:					0.040 CFS	1.20 AFA

C MARY F HAZELWORTH
3508 KOOTENAI ST
BOISE ID 83705
(208) 344-1760

Water Source: SPRING

Tributary to: PAYETTE RIVER, SOUTH FORK

Stage: LICENSE

Point(s) of Diversion: T08N R05E S06 Lot12(SWSE)

BOISE County

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:			
08N	05E	6	:																	:			
																12-D							

POU County: BOISE

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

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Dates: Exam Made Date: Verified Date: Objection Filed Date:

Misc: Water District Number: 65 Field Inspection Flag:
Presumption Flag:

Audit: 03/31/99 SVANHOFF 11/19/99 SVANHOFF 01/27/00 SVANHOFF