

Place Of Use Data Entry Form

Claim Number: A 2202341☐ Use Claimed POU as Recommended POU

Claimed Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
4N	44E	2	SW	NE	Teton		36	Trout Farm
"	"	"	SE	NW	"		11	"

Total Acres 47

Recommended Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use

Total Acres _____

Document how the POU was verified:

LICENSE. POU IS DIFFERENT FROM CLAIM WHY?
LICENSE POU SW NE + NE NW NW NE SE NE
T 4N R 44E.

Transfers Changing POU _____

Reviewer: _____

Date: _____

Period of Use and Quantity Data Entry Form

 Claim Number: A2207341
☐ 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
Irrigation	4/15	10/15		
Stock Water	1/1	12/31		
Domestic	1/1	12/31		

Overall Diversion Rate _____

Overall Diversion Volume _____

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume

Overall Diversion Rate _____

Overall Diversion Volume _____

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

IPWR std sou Irrigation 4/15 To 10/15
 License sou is same as claim

Reviewer: _____

Date: _____

Notes

MEET With Tom Hill. AT 1st
Basin 22 p.m. Report meeting AT Motel
& on 2-23-05. Mr Hill Filled out A
Field Amendment Form And Requested
To Amend Claim 00-02341 To Comply
with License For This Right. 2-24-05
WFO

Point of Diversion and Source Data Entry Form

Claim Number: 12207341Water Right Point of Diversion: T 4N, R 44E, Sec. 2, 1/4, SW, NE. County: TetonSource: Ground Water Tributary: _____

Claimed Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ 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
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						
_____	_____	_____	_____	_____	_____	_____
GPS Coordinates: _____						

Other rights from this POD? CPS TAG[#]

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

Transfers Changing POD _____

Reviewer: _____

Date: _____

Contacts Data Entry Form

H2007341

Owner Type _____ Full Name _____ Address _____ City _____ State _____ Zip _____ Phone _____

Current Owner: John Cushman III

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:

LICENSE Well Claims Irrigation, Stockwater
And Domestic. For a total (0.20 CFS) 10"
License is for Irrigation, Stockwater, Domestic.
For a total. 1.13 CFS. (Why?)
Claim is for 47 AC. License is for 52 (Why?)
Claim-POU DIFFERENT FROM LICENSE (Why?)

FE pop/pou Conveyance/system

Reviewer: _____

Date: _____

Water Right No(s). A025001

GPS DATA:

Tag # _____ Location: _____

Diversion Data:

Source: _____ Trib to: _____

MOTOR

Make: _____ Model: _____ Hp: _____

SN: _____

PUMP

Make: _____ Model: _____ Disch: _____

SN: _____

NOTES:

Wigawa is for 52" 1.04 CFS. 52 AC
Trigata Claim is for .20 CFS. 42 AC
Trigata Team Hld is going to Ammanu
Claim.

Field Exam Date: 11-17-09 Agent: Keith Chen

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):

Tom Hill, for John C. Cushman III

Date:

2-23-05

Date: _____

For Organizations:

I do solemnly swear or affirm that I am _____ of _____ Title _____

_____, t
Organization
document in the space below as __________, ar
Organization
foregoing document are true and c_____, t
Organization
document in the space below as __________, ar
Organization
foregoing document are true and c_____, t
Organization
document in the space below as __________, ar
Organization
foregoing document are true and cState of Idaho)
County of _____) SS.*With*Subscribed and sworn (or affirmed) before me this _____ day
of _____ 20 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

Claim. 1.04 CFS. On 52 ACRES.