

Contacts Data Entry Form

Water Right No. 1122.10835

Owner Type	Full Name	Address	City	State	Zip	Phone
Current Owner	<u>Lois</u>	<u>McCulloch</u>				
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:

B.N. Claim
REDUNDANT EVIDENCES OF Priority - MAILED REQUEST 2/24/04FE: 7/13/04 POO/POU. System/CONVOYANCES

Reviewer: _____

Date: _____

Priority Date Data Entry Form

Claim Number: A2210 835

Water Right Priority Date: _____ Water Right Basis: _____

Claimed Priority Date: 1 Jun 1960 Claimed Basis: B.U.Recommended Priority Date: _____ Recommended Basis: B.U.☐ Use Claimed Priority Date and Basis as Recommended Priority Date and Basis

Document the evidence submitted/reviewed for the priority date claimed, include your analysis of the evidence:

B.U. Claim

Reviewer: _____

Date: _____

Claim Number: A2210 835.

Source: _____ Tributary: _____

Source: Ground Water Tributary: SW 32

Source: _____ Tributary: _____

 Use Claimed POD and Source as Recommended POD and Source

Other rights from this POD? CP5 129 NOV 13087

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

Date: _____

Place Of Use Data Entry Form

Claim Number: A2210 835☐ Use Claimed POU as Recommended POU

Claimed Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
6N	45E	29	NE NE		Madison		36	Recreation
"	"	11	NW NE		"		22	"
"	"	"	SE NE		"		39	"

Total Acres 92

Recommended Place of Use

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

Total Acres _____

Document how the POU was verified:

Transfers Changing POU _____

Reviewer: _____

Date: _____

Period of Use and Quantity Data Entry Form

Claim Number: A2210835☐ 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	1.94	

Overall Diversion Rate 1.94 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:

IDWR STD SON 4/1 - 10/31

Reviewer: _____

Date: _____