

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION SECTION
CLAIM VERIFICATION FIELD EXAM SHEET
(Use with the ECVR)**

CLAIM NO(s). 75-10475

1. ☒ No Change NAME IS SAME
☐ NEW OWNER: _____
☒ No Change ADDRESS
☐ NEW ADDRESS: _____

2. ☐ No Change - DATA
☐ Incomplete - Claim
used and subr

Priority date, per claimant
(If the priority date, base

+ more in meter bands
75-9 ← pro-rate distribution → 75-3
irrigation
Jesse Ck
4-1-1894
1.5 cfs
22N22E 32 lots 3,6,8
22N22E 31 SESE
22N22E 31 NESE 7w/
22N22E 31 SESE 4 exceptions
22N22E 31 SESE NWSE
22N22E 31 SESE NESE
22N22E 31 SESE NWSE
22N22E 31 SESE NESE
POD has exceptions

3. ☒ No Change — SOURCE
☐ Source is different

Source found: _____

4. ☐ No Change — POINT OF DIVERSION
☒ Point of diversion is different than the claim and/or new P/D's:
GPS Site Tag No.: A0014938 file # 412P50P002

Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____
Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____

5. ☒ No Change - DESCRIPTION OF DIVERTING WORKS
☐ Incomplete description, list below:

headgate on creek ditches to pour. claimed diversions in
S31 22N 22E are diversion in ditches no cfs really taken

6. ☒ No Change - WATER USES
☐ Different uses, (list uses found):

Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____
Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____
Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____

7. ☒ No Change - TOTAL VOLUME

- ☐ Incomplete on claim, the total is, Amount _____ CFS _____ AFA
☐ Changes found, the new total is, Amount _____ CFS _____ AFA

8. ☒ No Change - NON-IRRIGATION USES:

- ☐ Changes Exam found:

Domestic # of homes: _____ Stock # _____ List types: _____

Additional comments: _____

9. ☒ No Change — PLACE OF USE: (If changed, list below.)

Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____

Remarks: (Comments pertinent to field examination) ☐ See additional attachment

☐ SYSTEM DIAGRAM INCLUDED ☐ NA

☐ Shown on GIS Layout

☒ CK IF IN OFFICE EXAM

DATE EXAM CONDUCTED: 5-5-06

FIELD EXAMINER: Bob Foster

Print Name

Bob Foster

Signature