

Notes

Added to SS & FI: B/D

3-29-06 Added maps. B/D

4-6-06. Added County info. B/D

4/12/06 This appears to be Lucille's house.

6/14/06 Age of home is 37 years, built in 1967.
NOT 1904?

9/29/06 Rec'd NDE - agree CB

09/12/2006

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 24-10709

LYNDEN JENKINS

BOX 171

FREEDOM WY 83120

Telephone Number: (208) 873-2888

LUCILLE JENKINS

BOX 215

FREEDOM WY 83120

Telephone Number: (208) 873-2888

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: SEPT 28 2006

SIGNATURE:

Lyndeen Jenkins

Please print your name:

LYNDEEN JENKINS

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161



ONWARD AND DESCRIPTION

RL 12130
EATKINS, MARLENE
AREA#28

~~ХАЛЗ-Ю-ХТТЗХ-СЕННУУ~~

BOX 134 512 215

FREEDOM WY, 83120

TR 16, LOT 3 .57 AC. SEC 15

TR 16 LOT 3 .57 AC. SEC 15

TAX CODE

PARCEL NUMBER

GROUND PLAN SKETCH



PROPERTY

ADDRESS

8329 State line Rd - Freedom

LAND VALUE CALCULATION

Lot Size	Quantity	Unit Value	Factor	Other	Value	1. Paved Street 2. Gravelled Street 3. Unimproved 4. Public Walks 5. Curb and Gutters 6. Alley (Surfaced) 7. Alley (Unsurfaced) 8. No Alley 9.	X	1. City Water 2. Well 3. Sewer 4. Septic Tank 5. Natural Gas 6. Caspool 7. L.P. Gas 8. Electricity 9.	Y	1. Single Family 2. Two Family 3. Multi Family 4. Commercial 5. Industrial 6. Agricultural 7. 8. 9.	1. Improv 2. Static 3. Declin 4. Blight
x				\$							
x	.57 AC				5000				X	X	
x											
x											
x				Total \$					X		

SUMMARY OF LAND AND IMPROVEMENT VALUES

Property	Code	Appraised Value 19	19	19	19	19	19	MISCELLANEOUS DATA
Land		\$						CLASS _____ USE CODE _____ MARKET GRADE _____ SHAPE CODE _____ YEAR BUILT <u>201</u> YEAR REMODELED <u>75</u> EFFECTIVE AGE _____ ZONING CODE _____ DATE OCCUPIED _____
Improvements		\$						RESIDENCE \$ _____ GARAGE \$ _____ CARPORT \$ _____ OTHER IMPROVE. \$ _____ TOTAL IMPROVE. \$ _____ LAND \$ <u>5000</u>
TOTAL		\$						MARKET VALUE \$ _____

AL 9-98

REMARKS

MARKS Have previously appeared to be to have

PRICE

Standard Report

Estimate ID:
Property Owner:
Address:
City:
State/Province:
ZIP/Postal Code:
Surveyed By:
Survey Date:

RL 1213
Crain, Camille Etal
Box 262
Freedom
Wyoming
83120

2/1/2004

Single-family Residence
Effective Age: 37
Cost as of: December, 2003
Style: One Story
Exterior Wall: Frame, Hardboard Sheets 100%
Plumbing Fixtures: 8

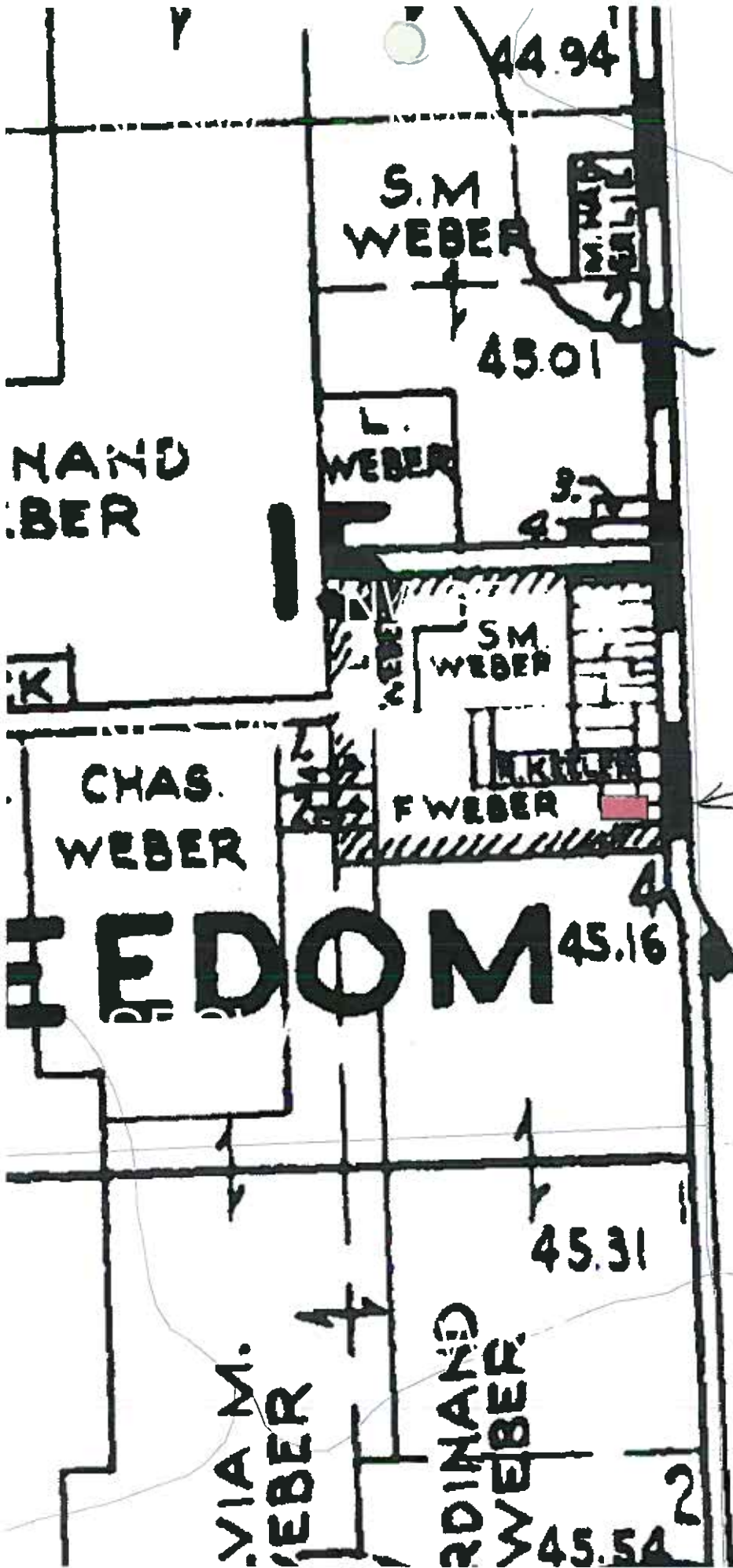
Floor Area: 1,368 Square Feet
Quality: 2.5 Fair/Average
Condition: 3 Average

	Units	Cost	Total
Base Cost	1,368	45.71	62,531
Plumbing Fixtures	8	800.63	6,405
Metal, Preformed	1,368	2.54	3,475
Raised Subfloor	1,368	5.71	7,811
Floor Cover Allowance	1,368	2.32	3,174
Electric Baseboard	1,368	2.87	3,926
Plumbing Rough-ins	1	336.00	336
Appliance Allowance	1	2,191.88	2,192
Basic Structure Total Cost	1,368	65.68	89,850
Replacement Cost New	1,368	65.68	89,850
Physical + Functional Depreciation 53.0%			47,619
Total Depreciated Cost			42,231
Land			6,000
Site Value			3,000
Storage Building	1	385.00	385
Storage Building	1	275.00	275
Open Mach Shed	1	2,415.00	2,415
Subtotal Miscellaneous			3,075
Non Building			12,075
Total			\$54,306

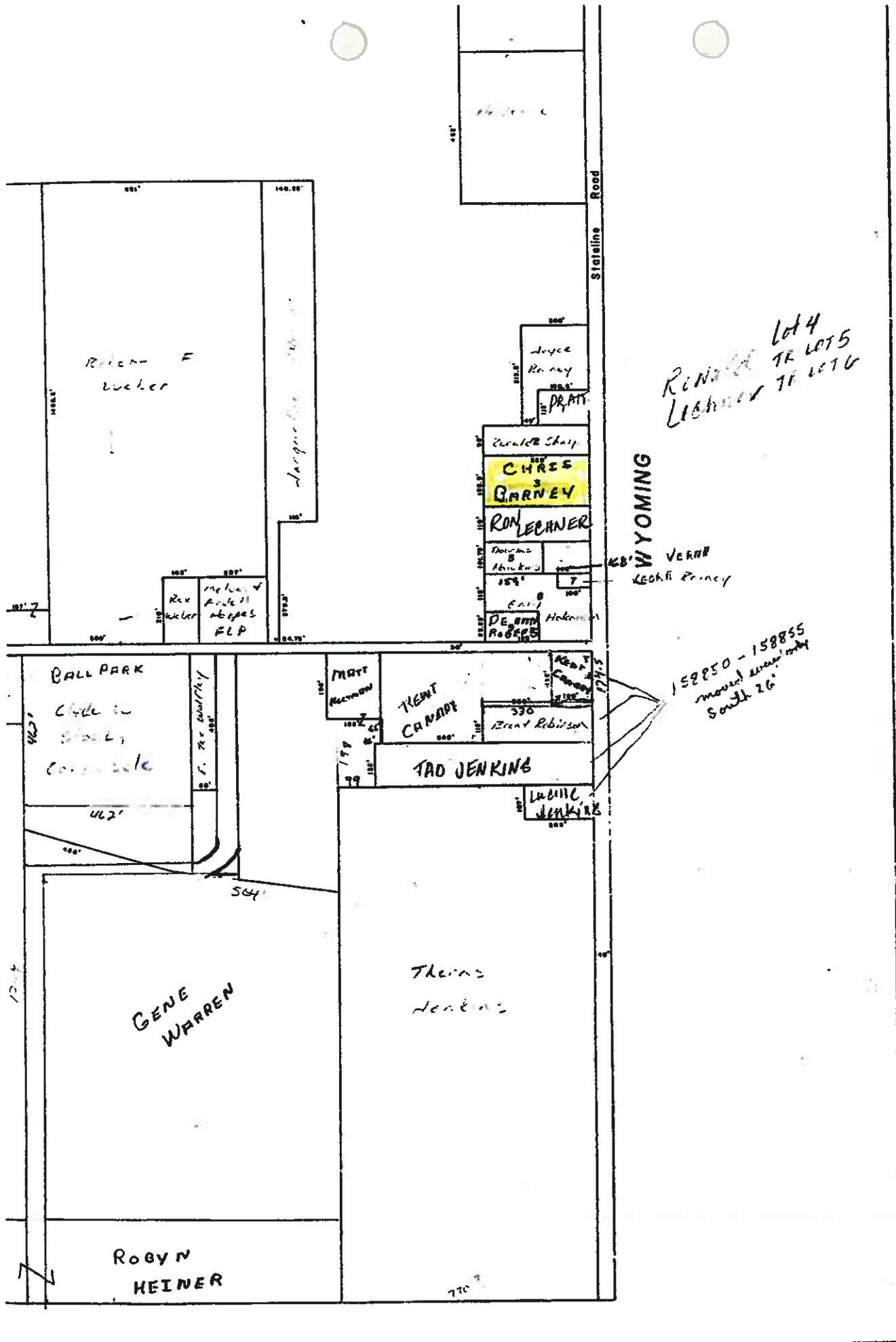
Cost data by Marshall & Swift, L.P.

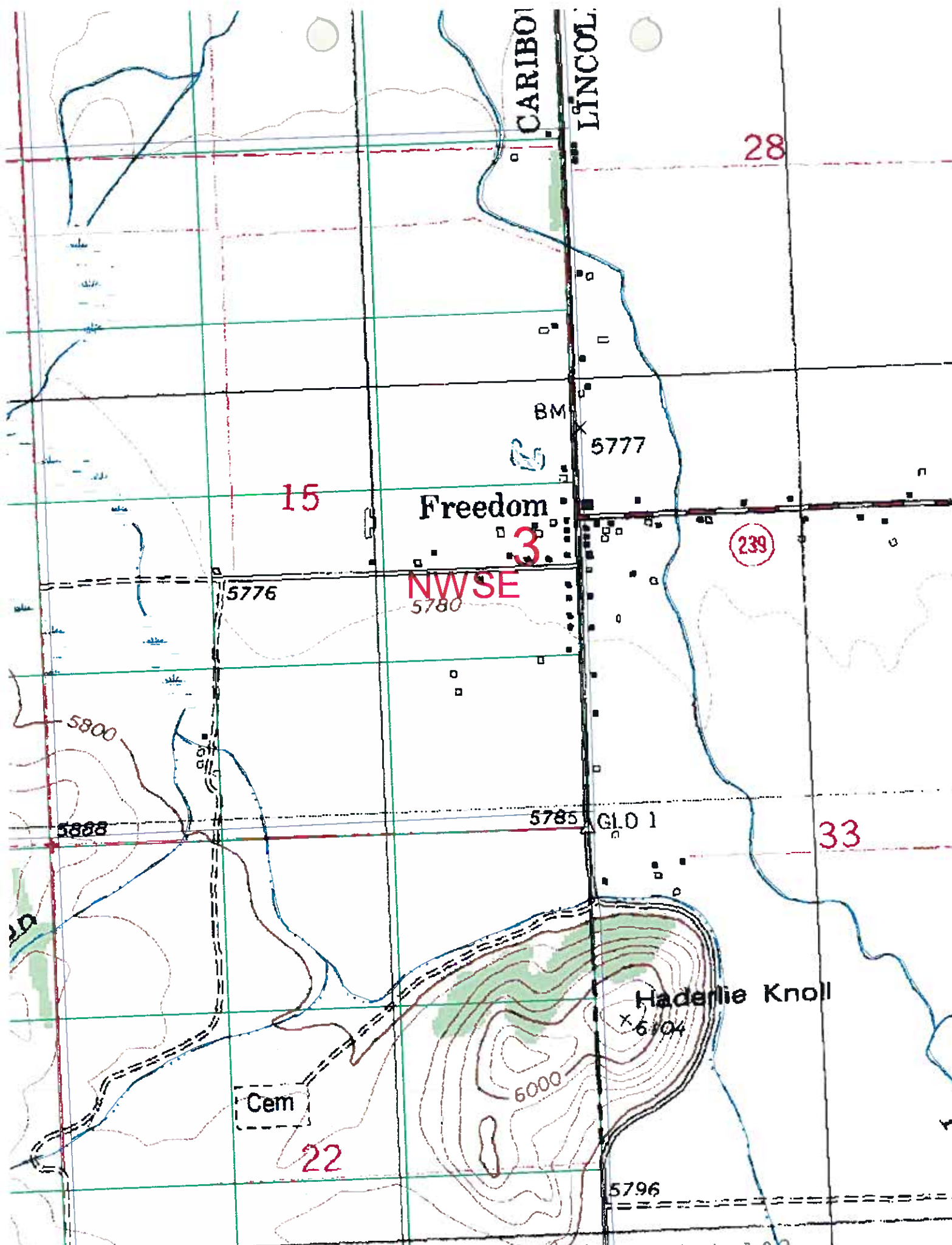
Remarks





Cogo Legal of
7-2-2004 Deed





CARIBO
LINCOLN

28

15

Freedom

3

NWSE

239

5776

5780

5777

5800

5828

5785

GLO 1

33

Cem

22

Haderlie Knoll

6104

6000

5796

TEC RULR 24-10709

15

WSE

MECH

WSE

15

NWSE

QUIT CLAIM DEED

KNOW ALL MEN BY THESE PRESENTS, that CAMILLE CRAIN JENKINS, GRANTOR, of the County of Caribou, State of Idaho, for and in consideration of TEN DOLLARS (\$10.00) and other valuable consideration, in hand paid, receipt of which is hereby acknowledged, hereby remises, releases and forever quits claim unto the said LUCILLE H. JENKINS, and her son, Lynden Jenkins as tenants in common, their heirs and assigns forever, all such right, title, interest, property, possession, claim and demand, as they may have or ought to have, in or to all the following described property, hereby releasing and waiving all rights under and by virtue of the homestead exemption laws of the State of Idaho, to wit:

A portion of Lot 3, Section 15, Township 5 S, Range 46 E, Boise Meridian, Caribou County, Idaho, being more particularly described as follows:

Beginning at a point 1063.52 feet South and 49.5 feet West of the Northeast corner of Lot 3, said Section 15, and running thence South 107.25 feet; thence West 206.25 feet; thence North 107.25 feet; thence East 206.25 feet to the point of beginning.

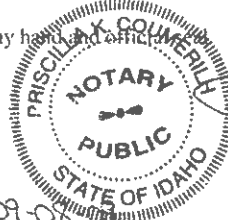
WITNESS my hand this 2nd day of July, 2004.

Camille Crain Jenkins
CAMILLE CRAIN JENKINS

THE STATE OF WYOMING)
) SS.
COUNTY OF LINCOLN)

The foregoing instrument was acknowledged before me by Camille Crain Jenkins, this 2nd day of July, 2004.

Witness my hand and official seal.



Priscilla K. Coulter
NOTARY PUBLIC

My Commission Expires: 09-08-2007

STATE OF IDAHO } ss
County of Caribou }
I hereby certify that this instrument was filed at the request
of Criss James
at 3:00 o'clock P in this 16 day of
July, 2004 in my office and duly
recorded official records
Recorder, Edie Bush
Della Ann Atkinson 5310
Signature Deputy

Idaho Department of Water Resources Receipt

Receipt ID B000003

Payment Amount \$517.00 Date Received 2/24/2006 5:42:18 PM Region Soda Springs Status ☒
 Payment Type Check Check Number 3640

Payer LUCILLE JENKINS

Comment	24-10711	\$51.00	24-10709	\$25-	
	24-10712	\$154.00	24-10708	\$60-	24-10714 \$135
	24-10713	\$67.00	24-4070	\$25-	

Fee Detail

Amount	Description	Fund	FD	PCA	SO
\$517.00	ADJUDICATION FILING FEE	0337		41503	1155


 Signature Line (Dept. Representative)

09/11/2006

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 24-10709

NAME AND ADDRESS: LYNDEN JENKINS
BOX 171
FREEDOM WY 83120

LUCILLE JENKINS
BOX 215
FREEDOM WY 83120

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS

The quantity of water under this right for domestic use shall not exceed 13,000 gallons per day.

PRIORITY DATE: 06/01/1904

POINT OF DIVERSION:

T05S R46E S15 SENWSE Lot 3 Within CARIBOU County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

DOMESTIC

01/01 12/31

0.040 CFS

Domestic use is for 1 home.

PLACE OF USE: DOMESTIC Within CARIBOU County

T05S R46E S15 Lot 3 NWSE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

The quantity of water decreed for this water right for domestic use is not a determination of historical beneficial use.

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.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Beneficial Use

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 24-10709
Date Received: 2/24/2006
Receipt No:
Received By:

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

1. Name of Claimant(s)

LYNDEN JENKINS Phone: (208) 873-2888
BOX 171
FREEDOM ID USA 83120

LUCILLE JENKINS Phone: (208) 873-2888
BOX 215
FREEDOM WY USA 83120

2. Date of Priority: 06/01/1904

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
05S	46E	15	SE NW SE 3	CARIBOU	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
STOCK 20, HORSES 5.

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
05S	46E	15	NW SE 3	DOMESTIC	

11. Place of use in counties: CARIBOU

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Beneficial Use

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: _____

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): _____ Date: _____

_____ Date:

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this

of _____ 20__

Notary Public

Residing at _____

My commission Expires _____

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

CIVIL CASE NUMBER: 39576

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEMIdentification No. 24-10709

Date Received _____

Receipt Number _____

NOTICE OF CLAIM
TO A
WATER RIGHTACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) SON MORTEN LYNDEN + LUCILLE JENKINS Phone (288) 873 2888Mailing Address Box 177 OR Box 215 FREEDOM WYO 83120 Zip 831202. Date of Priority (Only one per claim) JUNE 1 1904 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 5 S Range 46 ESection 15, SE 1/4 of NW 1/4 of SE 1/4, Govt. Lot 3, BM.,County of Caribou

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. 6" OR 8" CASSING ONE HORSE PUMP ABOUT 40' OR 50' DEEP

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For Domestic purposes from 11 Month/Day to 12/31 Month/Day amount 0.04 (cfs)

(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) stock 20 - stock, 5 horse

10. Place of use is: Township: 55 Range 46E
Section 15, NW 1/4 of SE 1/4, Govt. Lot 3, B.M.,

for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

11. In which county (ies) are lands listed above as place of use located? Caribou

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

X None or _____

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments 2

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) X [Signature] Date FEB 24 2006
X [Signature] Date 24 Feb 2006

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)

County of Bannock) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 24th day of February, 2006

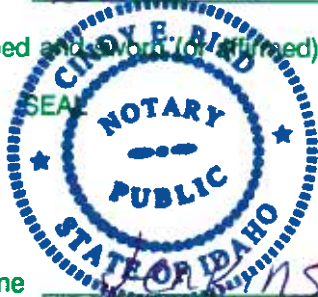
Notary Public Cindy E Bird

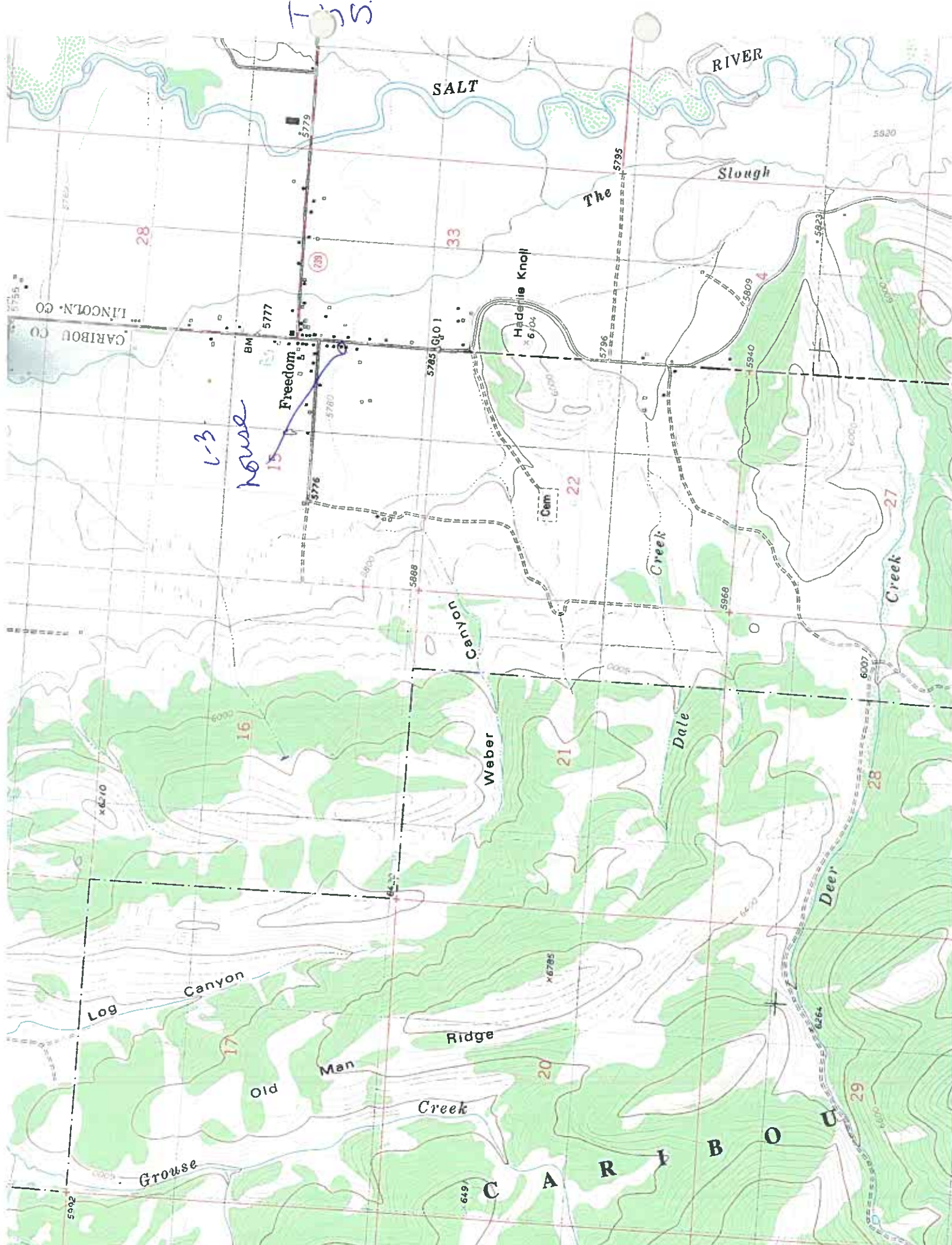
Residing at Lava Hot Springs

My Commission Expires May 1, 2007

Last Name [Signature] Ident No. _____

Copies: White-State, Yellow-Claimant





1-755

1-3 house

SALT

RIVER

Slough

The

Hedelle Knoll

6104

Cem

Creek

Creek

Dale

Weber

Canyon

Canyon

Log

Ridge

Old Man

Creek

Grouse

Deer

Creek

C

A

R

B

O

U