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OCT 04 2006

DEPARTMENT OF
WATER RESOURCES

08/18/2006

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: September 22, 2006

Water right number: 79-14148

MARINA C CAWLEY
PO BOX 56
WHITE BIRD ID 83554
Telephone Number: (208)839-2565

MAX E CAWLEY JR
PO BOX 56
WHITE BIRD ID 83554
Telephone Number: (208)839-2565

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: 9-22-06 SIGNATURE: 
Please print your name: MAX CAWLEY

IDWR Regional Office, 322 E Front St
PO Box 83720, Boise, ID 83720-0098, (208) 287-4800

01/24/2006

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

RIGHT NUMBER: 79-14148

NAME AND ADDRESS: MARINA C CAWLEY
PO BOX 56
WHITE BIRD ID 83554

MAX E CAWLEY JR
PO BOX 56
WHITE BIRD ID 83554

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.100 CFS

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

PRIORITY DATE: 07/12/2001

POINT OF DIVERSION:

T28N R01E S10 SWNW Within IDAHO County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
DOMESTIC	01/01 12/31	0.080 CFS
STOCKWATER	01/01 12/31	0.020 CFS

PLACE OF USE: STOCKWATER Within IDAHO County

T28N R01E S10 SWNW

DOMESTIC Within IDAHO County

T28N R01E S10 SWNW

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

The quantity of water decreed for this water right 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 79-14148
Date Received: 12/14/2005
Receipt No: C079856
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

MARINA C CAWLEY Phone: (208)839-2565
PO BOX 56
WHITE BIRD ID USA 83554

MAX E CAWLEY Phone: (208)839-2565
PO BOX 56
WHITE BIRD ID USA 83554

2. Date of Priority: 07/12/2001

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
28N	01E	10	SW NW	IDAHO	

5. Description of diverting works:

TWO HOMES, ONE SHOP WITH APARTMENT, 5 HORSES, CATTLE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.02	
DOMESTIC	01/01	12/31	0.08	

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

8. Total consumptive use:

9. Non-irrigation uses:

Number of other uses: 5 HORSES, CATTLE

Number of homes: 2

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
28N	01E	10	SW	NW	DOMESTIC	
			SW	NW	STOCKWATER	

11. Place of use in counties: IDAHO

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

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 79-14148Date Received 12-14-05Receipt Number C079856NOTICE 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.

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DEC 14 2005

DEPARTMENT OF
WATER RESOURCES
RECEIVED

DEC 23 2005

WATER RESOURCES
WESTERN REGION

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) MARINA C. CAWLEY / MAX E. CAWLEY JR Phone (208) 839-2565Mailing Address P.O. BOX 56 WHITE BIRD, ID. Zip 835542. Date of Priority (Only one per claim) JULY 12, 2001 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 T28N Range R01ESection S10 1/4 of SW 1/4 of NW 1/4, Govt. Lot _____, B.M.,County of IDAHO

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. WELL 150 ft deep, 1 hp pump, 115 ft poly pipe to pressure tank

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

For DOMESTIC 2 HOUSES purposes from 01/01 to 12/31 amount .08 (cfs)

(Both dates are inclusive)

For STOCKWATER purposes from 01/01 to 12/31 amount .027. Total quantity claimed .10 (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) TWO HOMES, ONE SHOP W/ 1/2 APARTMENT, 5 HORSES, CATTLE

SCANNED

DEC 22 2005

10. Place of use is: Township: T28N Range R01E
Section S10 SW 1/4 of N04W 1/4, Govt. Lot _____, 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? IDAHO

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.
() None or 79-13608 79-13609

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 _____

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

Signature of Claimant (s) Angela C. Cawley Date 12/7/05
Max E. Cawley Date 12/7/05

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

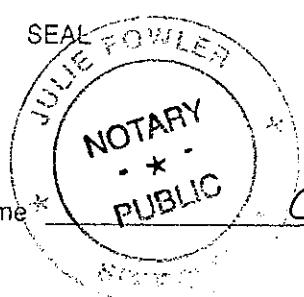
of _____, Title _____
Organization _____, that I have signed the foregoing
document in the space below as _____ of _____
Title _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)
County of IDAHO) SS. **NOTARIZATION REQUIRED FOR EACH CLAIM**

Subscribed and sworn (or affirmed) before me this 10th day of DEC 2005



Notary Public Julie Fowler
Residing at White Bird
My Commission Expires 3-21-11

Last Name* Cawley Ident No. 79-14148
Copies: White-State, Yellow-Claimant

SCANNED

DEC 22 2005

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D 00 17497
 DRILLING PERMIT NO. _____
 Water Right or Injection Well No. _____

769925
 12. WELL TESTS:

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
50			1.00

Water Temp. 54° Bottom hole temp. _____

Water Quality test or comments: Good

Depth first Water Encounter 13

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
10	0	5	Overburden			
10	5	18	Soft withrd Bslt			
6	18	56	med Hrd withrd Bslt			
6	56	136	BLK Bslt			
6	136	150	Fine Bslt			

2. OWNER:

Name MAX Cawley
 Address PO Box 56
 City White Bird State ID Zip 83554

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 28 North ☒ or South ☐
 Rge. 1 East ☒ or West ☐
 Sec. 16 1/4 NE 1/4 SE 1/4
 Gov't Lot _____ County TERRELL

Lat: _____ Long: _____
 Address of Well Site Tammy Rd

(Give s) Road name or Distance to Road or Landmark
 Lt. 2 Blk. _____ Sub. Name Twin Rivers

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	18	350*	Top Pour

Was drive shoe used? 2Y ☐ N Shoe Depth(s) 18
 Was drive shoe seal tested? 2Y ☐ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	-18	250	Steel	☒	☐	☒	☐
4.5"	-10	-150	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method SAW
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-130	-150	1/4 x 1/4	36	4.5	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
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11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

38 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____

Top of casing

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NOV 21 2002

WATER RESOURCES
WESTERN REGION

Completed Depth 150 (Measurable)

Date: Started 7-12-01 Completed 7-12-01

14. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name UHLERKOH Drilling Firm No. 125

Principal Driller [Signature] Date 7-13-02

Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.