

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: A35-08054
Date Received: 5/24/1989
Receipt No: E007908
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: RONALD W. STROSCHEIN 208-397-4705
Address: 1292 S. 2600 W.
STERLING, ID 83279

OR
Name: BETTY L. STROSCHEIN 208-397-4705
Address: 1292 S. 2600 W.
STERLING, ID 83279

2. Date of Priority: AUG 23, 1982

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
05S	31E	3	SE	SE			BINGHAM

5. Description of diverting works:
WELL, PUMP, MAINLINE & WHEEL LINES

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	2.930		

7. Total Quantity Appropriated is:
2.930 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 453.0 Acre Feet Per Annum.

9. Non-irrigation uses:
N/A

A3508054



10. Place of Use:

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
05S	31E	3	NE		SE		IRR	39.0
			NW		SE		IRR	39.0
			SW		SE		IRR	39.0
			SE		SE		IRR	34.0
Section Acres								151.0
Total Acres								151.0

11. Place of use in counties: BINGHAM

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

13. Other Water Rights Used:
N/A

14. Remarks:

15. Basis of Claim: LICENSE

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 X 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.

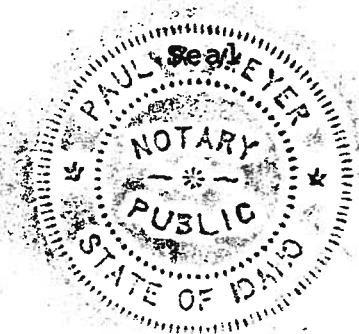
Signature of Claimant(s): Ronald Strocher Date: 5/24/89
Betty L. Strocher Date: 5/24/89

State of Idaho)
County of BONAVILLE) SS.

Subscribed and sworn (or affirmed) before me this 24 day
of May 19 89

[Signature]
Notary Public

Residing at Idaho Falls
My Commission Expires 9-12-94



ROAD

39

34

3

NOT TO SCALE

DEC 10 1992

35-8054

R 31E

TS

P/W

MICRO
DEC 1

DEC 10 1992

SCALE: 2 inches Equal 1 Mile. Draw Plan in Ink.

WHITE - State Auditor
 YELLOW - Remittance Advice
 PINK - State Auditor then Agency
 GOLDENROD - Agency Copy

EXPENDITURE VOUCHER

AUDITOR USE

STATE OF IDAHO
 Office of State Auditor

AGENCY USE

8619
Date 04/03/92
Code 193002

VENDOR: If you require additional information regarding this payment, please contact the State agency listed below.

AGENCY NAME:

DEPT. OF WATER RESOURCES
 TAX EXEMPT # X-189030-E-920
 VALID THRU 1/94

Document No. 1075561	
Pre-Audit	Date APR 07 1992
Warrant No.	

PAY

TO

MRS. RONALD W. STROSCHEIN
 1292 S 2600 W
 STERLING, ID 83279

CHECK ONE:

(1) MISCELLANEOUS EXPENDITURE

() STATE CONTRACT

() PURCHASE ORDER

() MISCELLANEOUS ENCUMBRANCE REQUISITION

PAYMENT: () PARTIAL () FINAL

Encumbrance Reference No.

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	04 10 162	9337	8831		REFUNDS PER ERNIE CARLSEN CLAIM #A35-08054 4/ 2/92 151.00	151.00	
RECEIVED APR 23 1992 Department of Water Resources Eastern District Office							
TOTAL						151.00	

NOTE: Final payment must be accompanied by a receiving copy

TO STATE AUDITOR

Request is hereby made that a warrant be authorized and drawn in payment of the item or items described above. I hereby certify that the items described were ordered by proper authority; that they are necessary in the public service, that the items have been received and accounted for, and that the account as stated is correct and just.

AUDITOR'S CERTIFICATE

I hereby certify that the above account is in proper form, that totals carried hereon are correct; that receipts when required by law or regulation of the State Board of Examiners covering items for which reimbursement is asked are submitted herewith; and that there are funds in the state treasury and balances in appropriation accounts out of which the same may be lawfully paid.

Date

Head of Agency or Institution

State Auditor

1007908

39

REFUND REQUEST

TO: S. Frazee to Log In
FOR: J. Carlson/D. Shaff/D. Allen
FROM: Ernie Carlson DATE: Feb 14, 1992

RE: Payor Mrs. Ronald W. Stroschein **RECEIVED**
Address 1292 S 2600 W
Sterling ID 83279 FEB 24 1992

Claimant if NOT Payor Ronald or Betty L. Department of Water Resources
Refund Amount \$ 151⁰⁰ Claim Location Region
Extension Filed? Y/N NA Copy Attached? Y/N NA
Late Fees Paid? Y/N NA On Receipt #
S.O. Verified Ext. by on
Refund Generated By () Agent (X) Claimant telecom
Refund Category Double payment of Variable fee.
Date of Last Correspondence (copy attached) 2-20-92

Claim No.	Use	Fees Paid	Correct Fee	Rec't #
<u>A35-08054</u>	<u>01</u>	<u>\$ 201⁰⁰</u>	<u>50⁰⁰</u>	<u>E007908</u>

Detailed Reason(s) for Refund Attached Y/N

Region Adj. Supervisor Approval EMC John Carlson Approval pe
Don Shaff Approval 4-02-92 Hold To Fiscal
Not Refunded as of 3-4-92 Logged 02-25-92
Data Base Modified? Y/N NA By D. Frazee Date 02-25-92

Claimant paid assessment to Aberdeen Springfield Coal Co. for husband's
land included on coal company claims. and then also paid
the variable fee for same of the same land under claim A35-08054.
Subsequently the coal co paid variable fee for P.O.U. # on
A35-08054 & A01-0002321 under receipt E014259. Comparison
of P.O.U. between these claims reveals an overlap of 151 acres.
Claimant is therefore due a refund of \$151⁰⁰ paid under receipt E007908.

→ of EWC mail ltr.

MICROFILMED

12/30/91

DEC 10 1992

Date: 02/14/92
Time: 09:16:34

Receipt Amt : 226.00

[illegible]

(Enter=Continue) (GOLD2=Update) (GOLD4=Prev Pg) (GOLD5=Next Pg)

A35-08054

MICROFILMED
DEC 10 1992

15/00 overlap

MICROFILMED
DEC 10 1992



State of Idaho
DEPARTMENT OF WATER RESOURCES

150 Shoup Ave., Suite 15, Idaho Falls, Idaho 83402 - (208) 525-7161

EASTERN REGION

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

DATE: *Feb 20, 1992*

MRS. RONALD W STROSCHER
1292 S 2600 W
STERLING ID 83279

RE: REFUND

Dear *Mrs. Stroscher*:

This office has initiated a Refund Request for the double payment of fees in the Snake River Basin Adjudication (SRBA).

Comparison of the land list on your Notice(s) with the lands listed on claims submitted by Aberdeen-Springfield Canal Company revealed an overlap of the following:

151 acres on A35-08054

Therefore, the Refund Request is for \$*157⁰⁰*, paid under receipt *EDD 4908*. A check for this amount should be mailed from Boise in the near future.

Naturally, if you have any questions, feel free to contact this office (525-7161).

Respectfully submitted,

Ernest Carlsen.
Ernest Carlsen
Adjudication Supervisor

EC:jt

cc: Aberdeen-Springfield Canal Company

File: To Claim

MICROFILMED

DEC 10 1992



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000
Phone: (208) 327-7900 FAX: (208) 327-7866

RECEIVED

DEC 23 1996

Department of Water Resources

PHILIP E. BATT
GOVERNOR

December 17, 1996

KARL J. DREHER
DIRECTOR

cc: W.D.

RONALD W STROSCHEIN
BETTY L STROSCHEIN
1292 S 2600 W
STERLING ID 83210

Re: Snake River Basin Adjudication (SRBA)
Notice of Claim No. A35-08054
Change of Address

'A' + 'R' records modified 12-26-1996.
/ps

Dear Claimant:

IDWR has been notified the address presently in our claim records is incorrect. Although we have reached you at the address above, we need you to confirm this is your correct mailing address. Future notices related to your SRBA claim can be sent only to the address on your claim or as otherwise changed by you. The staff of this agency must avoid relying upon the word of others about your mailing address.

If the address above is correct, please sign your name and title at the bottom of this letter, and return it to this office. Otherwise, please make the proper corrections, sign, and return this letter. Thank you for your help. We hope to assure that you receive future notices about SRBA matters.

If there has been a change in ownership of the property to which the water right referenced above applies, please call this office toll-free at 1-800/451-4129 to obtain a form to make this required change to the claim record.

Sincerely,

Adjudication Bureau Staff

SO:ss:region

#####

The address is correct as shown above or as otherwise changed.

Ronald Stroschein
Claimant Signature

RONALD W. STROSCHEIN
1292 S. 2600 W.
ABERDEEN, IDAHO 83210

IDAHO DEPARTMENT OF WATER RESOURCES
RONALD & BETTY STROSCHEIN
Water Right No(s).
35-08054

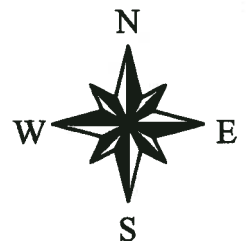


0 1320 2640 Feet



Point of Diversion
Location

Township(s) 05S, Range(s) 31E
Section(s) 03



Place of Use
Boundary



Section Lines



Quarter/Quarter Lines

GIS Place of Use Illustration
1987/1988 NAPP Photography
Prepared by: Greg Taylor
Date: Sept. 21, 1998

D.

RATE/VOLUME CALCULATIONS: (IRRIGATION)

1A. IRRIGATION RATE
ACRES _____ X 3.02 CFS/ACRE = _____ CFS
(TAKEN FROM P/U REVIEW)

1B. CALCULATIONS

DOES AMOUNT CLAIMED EXCEED 0.02 CFS/ACRE? Y() N()

*** IF YES ADDITIONAL WATER USE FORM FILED AND ATTACHED? Y() N() ***

2. IRRIGATION CONSUMPTIVE USE

CLAIMED CONSUMPTIVE USE = 453.0 AF/A
ACRES 151 X CONSUMPTIVE VOL. AF/A FOR AREA 3 =
TOTAL CONSUMPTIVE USE 453 AF/A

3. IRRIGATION DIVERSION VOLUME

CLAIMED DIVERSION VOLUME = _____ AF/A
ACRES 151 X DIVERSION VOL. AF/A FOR AREA 4 =
TOTAL DIVERSION VOLUME 604 AF/A

4. CALCULATIONS FOR USES OTHER THAN IRRIGATION:

SEE ATTACHED SHEET? Y() N()

REMARKS: (INCLUDE LIMITATIONS ON CONSUMPTIVE USE FOR COMBINED RIGHTS.)

RECOMMENDATIONS:

REC. PURPOSES	REC. PERIOD FROM TO	REC. DIV RATE CFS	REC. DIV VOL. AF/A	REC. CONS. USE
IRRIGATION	04-01	2.930	604	453.0
TOTAL FOR THIS RIGHT		2.930		453.0

REVIEWED BY: DC

DATE: 11/9/92

BASIS OF CLAIM REVIEW SHEET

CLAIM NUMBER: A35-08054

A. CHECK ONLY THE FOLLOWING THAT APPLY:

OWNERSHIP FORFEIT/ABANDON ☒ ACCEPTED AS CLAIMED ☒ NEEDS REVIEW ☒
ADDITIONAL DIV. AMOUNT ☐ ☐ ☐

B. SPLIT WATER RIGHT REVIEW

ROOT WATER RIGHT NUMBER: 35-08054
TOTAL DIVERSION RATE OF WR SPLITS CFS
SPLITS:
OLD RIGHT CURRENT DIVERSION "R" DIV. DIVERSION
NUMBERS CLAIM NUMBERS RATE RATE RATE
- A35-08054 2.930 - 35-08054 2.930
TOTAL CFS 2.930 2.930

DIVERSION RATE REVIEW

DO THE SUM CFS RATE OF THE SPLITS EQUAL THE ROOT RIGHT CFS RATE? (Y/N)
IF NO, IS THE WRITTEN REVIEW SHEET ATTACHED? (Y/N)

REMARKS:

AUTHENTICATION:

SIGNATURE: Dave Carlson DATE: 11/9/92
NAME OF FIELD EXAMINER: DAVE CARLSON TITLE: WA

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

02:32:53
11/04/91

PAGE: 13
QUICKLOOK INFORMATION

CLAIM NUMBER: A35-08054

WR ELEMENT	FIELD EXAM Y/N	CORRESPONDENCE SENT/RECEIVED BY WHOM/DATE	FIELD EXAM BY WHOM/DATE	CHANGE CLAIM Y/N	VERIFIED BY CODE	COMPLETED REVIEW WHOM/DATE	COMPLETED DATA ENTRY WHOM/DATE	VERIFIED DATE WHOM/DATE
PRIORITY DATE								
POINT OF DIV	Y		Dubz	Yes				
SOURCE								
PLACE OF USE	Y			No				
DIV. AMOUNT CFS/VOLUME								
CONSUMPTIVE USE								
PURPOSES								
PERIOD OF USE								
BASIS OF CLAIM				Yes				
REMARKS								

"VERIFIED BY" CODES

TOPD MAP/ORTHO-PQ = 1
 ASCS MAP = 2
 WATERMASTER RECORDS = 3
 WAPP PHOTOS = 4
 FIELD EXAM = 5
 OTHER (SEE REMARKS) = 6

THESE CODES ARE USED TO INDICATE HOW THE FIELD EXAMINER VERIFIED THE INFORMATION
USED FOR THIS FIELD EXAMINATION. INDICATED ARE ALL CODES WHICH APPLY.

10 day

Permit No. ✓	Priority	Amount ✓	App. Date	Date Proof Submitted	System Capacity
35-8054	8-23-1982	2.93 cfs ✓	8-23-1982	8-8-1983	2.93 cfs ✓

4 Permit Holder Ronald H. Struschein ✓

Address Stedins Pt Box 1 ✓ Abandon, Idaho 83210 ✓

5 Source Groundwater ✓ Tributary to _____

6 Beneficial Use

	Period of Use From	To	Rate of Diversion Q (cfs)	Annual Volume V (afa)
<u>Irrigation</u> ✓	<u>4-1</u> ✓	<u>11-1</u> ✓	<u>2.93 cfs</u> ✓	<u>528.5</u> ✓

Allowable Maximums

2.93 c/w 528.5 AF

7 Point(s) of Diversion. ✓								
No.	Govt. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County
		SW	~~SE~~	~~SE~~	3	SS	11E	Bingham ✓

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			N	E	W	S	N	E	W	S	N	E	W	S	N	E	W	S	
5S	31E	3																	151
			Total Acres																151

9. Recommended Conditions/Remarks: R30

10. Recommended Amendments

☐ Change P D as reflected above ☐ Add P D as reflected above ☒ None

☐ Change P U as reflected above ☐ Add P U as reflected above ☐ Other

11 Examiner's Signature *St. Jones*
Checked in Regional Office by *Kath C Wilson*
Approved in State Office by *K. Winkler*

Date 10-2-84
Date 15 Nov 1984
Date 4-2-1986

453.0 AFA

TRIBUTARY TO:

STAGE: LICENSE
BINGHAM COUNTY

[illegible]

OTHER WATER RIGHTS WITH SAME POINT(S) OF DIVERSION AND SOURCE:
A35-11455

A01-0002370 A01-0029770 A01-0206460 A01-0206850 A01-0206890 A35-0254370 A35-0424670

CONDITIONS OF APPROVAL:

DATE: EXAM MADE DATE:

FIELD INSPECTION FLAG:
PRESUMPTION FLAG: