

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 63-32430  
Date Received: 3/15/1990  
Receipt No:  
Received By:

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

JON M AGEE Phone: (208)454-3960

15603 RIVERSIDE RD  
CALDWELL ID USA 83607

2. Date of Priority: 11/04/1948

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

| Township | Range | Section | 1/4 of 1/4 of 1/4 Lot | County | Type |
|----------|-------|---------|-----------------------|--------|------|
| 03N      | 03W   | 17      | NE SW                 | CANYON |      |

5. Description of diverting works:

6. Water is used for the following purposes:

| Purpose    | From  | To    | C.F.S. | (or) A.F.A |
|------------|-------|-------|--------|------------|
| IRRIGATION | 03/15 | 11/15 | 0.05   |            |

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

| Township | Range | Section | 1/4 of 1/4 | Lot | Use           | Acres |
|----------|-------|---------|------------|-----|---------------|-------|
| 03N      | 03W   | 17      | SE         | NW  | IRRIGATION    | 4     |
|          |       |         |            |     | Section Acres | 4     |
|          |       |         |            |     | Total Acres   | 4     |

11. Place of use in counties: CANYON

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

13. Other Water Rights Used:

14. Remarks:

This right is a split from former right 63-2734A.

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 \_\_\_\_\_ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

(H) J. J5809NP

STATE OF IDAHO  
IDAHO DEPARTMENT OF WATER RESOURCES  
**NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP**

RECEIVED

AUG 14 1996

WATER RESOURCES  
WESTERN REGION

Please print or type. Attach pages with additional information. Instructions are on the back of this page.  
Incomplete forms will be returned.

1. Water Right Number(s) J5809NP  
Adjudication Claim Number(s) A63-07394A A63-02734A
2. The following **REQUIRED** information must be submitted with this form.
  - A. A copy of the most recent DEED, TITLE POLICY, CONTRACT OF SALE, or other legal document indicating your ownership of the property and water rights or claims in question, WITH ATTACHED LEGAL DESCRIPTION.  
AND
  - B. PLAT OF PROPERTY or SURVEY MAP for parcel of ten acres or less. (These are usually on file with the county.)  
OR
  - C. For water rights or adjudication claims involving ten or more irrigated acres, a USDA Farm Service Agency (formerly ASCS) AERIAL PHOTO with irrigated acres outlined and point(s) of diversion clearly marked.
3. Name and Address of Former Owner/Claimant(s) Barrett Farms LTD  
2308 Terrace Dr Caldwell ID 83605  
208-459-2418
4. New Owner/Claimant(s) Jon Agee  
Name connector (Check one): ☐ AND, ☐ OR, ☐ AND/OR  
New Mailing Address 15603 Riverside Rd  
City, State and ZIP Code Caldwell ID 83605  
New Telephone Number (208) 454-3960
5. Date you acquired the property 5/18/92
6. If you have acquired only a portion of the former owner's property, IDWR may need to split the water right(s) or adjudication claim(s). If this applies, describe in detail your portion of each water right or adjudication claim in the spaces below. If necessary, attach additional pages.  
Number of acres actually irrigated 4.01 Number and type of stock \_\_\_\_\_  
Diversion rate in CFS \_\_\_\_\_ Number of homes 1 Other uses \_\_\_\_\_  
cubic feet per second  
If a water right or adjudication claim is being split and you are not sure how to identify your portion of the original right or claim, please contact the nearest IDWR office for assistance.
7. Signature of New Owner/Claimant(s) Jon Agee Date 8/9/96  
\_\_\_\_\_  
Date \_\_\_\_\_
8. (Corporations or other organizations must submit a list of directors/officers demonstrating authority to sign form.)  
For Snake River Basin Adjudication Claims: If you are represented by an attorney and you want IDWR to correspond directly with your attorney for all matters related to your claims, please attach a Notice of Appearance completed by your attorney.

## INSTRUCTIONS

This form has been prepared to assist new owners of property to comply with the requirements of Sections 42-248 and 42-1409(6), Idaho Code. Section 42-248 requires certain property holders to notify the Department of Water Resources (IDWR) of any change in mailing address or ownership of all or part of a water right record on file with IDWR. Section 42-1409(6) provides that new property owners must notify IDWR of any change in ownership of a water right during an adjudication of water rights, and, if a required claim for the water right has not been filed, to file the needed claim.

Separate brochures are available from IDWR describing the adjudication of water rights and the requirement to notify IDWR of changes in ownership. If you would like any of these brochures, or if you have questions about completing this form, please contact your nearest IDWR office or call 1-800-451-4129.

If you need additional space to describe or explain any of the items on the form, please attach additional sheets to the form as you may require.

1. If there are water rights associated with the property, the seller should be able to provide you with the water right or adjudication claim number(s). Please enter these number(s) at Item 1. If you or the seller believe there are water rights for the property but the numbers are unknown, you may wish to call IDWR or come into an office of IDWR for assistance in identifying the water rights for the property in question. If claims for the rights are required, and have not been filed, IDWR will so advise you.
2. The information described at Item 2 is required, since IDWR cannot process the requested change without documentation of ownership. The preferred types of documentation are shown; contact IDWR if you have difficulty obtaining this information. Do not obtain a new survey for purposes of this form before contacting IDWR.
3. Please provide the name and address of the former owner of the water right and/or adjudication claim at Item 3.
4. The name, mailing address, and telephone number of the new owner(s) is entered at Item 4. Please indicate the relationship between multiple owners by using the connector "and", "or" or "and/or". If an "and" is used, all parties must sign this form. If an "and/or" or "or" is used, all parties may sign, however only one of the named parties is required to sign.
5. At Item 5, please provide the date the property in question was acquired. This may be the date of "closing" in the case of a real estate transaction or the date of court order for other types of ownership changes.
6. If the property you have purchased is only a portion of the property owned by the former owner/seller, you may be purchasing only a portion of the total water right held by the seller. This means the water right held by the seller may be "split" to provide your share of the right in question. Be sure to include a description of the portion of the water right you have purchased at Item 6.

Please provide as much detail as possible concerning your water right: include the number of homes, irrigated acreage if more than 1/2 acre is irrigated, type and number of stock if your right is for stockwater, etc. In the absence of information to the contrary, IDWR will assume the intent is to split the rights *proportionately*.

7. The new owner(s) must sign the form in the space(s) provided at Item 7. Corporations and other organizations must submit a list of directors or officers demonstrating the authority of the director or officer to sign the form.
8. There is no filing fee. When complete, you should retain a copy and return the original of the form to the IDWR office nearest you:

→ IDWR Western Region, 2735 Airport Way, Boise, ID 83705-5082 (208) 334-2190

IDWR Southern Region, 222 Shoshone St. E., Twin Falls, ID 83301-6105 (208) 736-3033

IDWR Northern Region, 1910 Northwest Blvd., Suite 210, Coeur d'Alene, ID 83814-2615 (208) 769-1450

IDWR Eastern Region, 900 N Skyline Dr., Suite A, Idaho Falls, ID 83402-1718 (208) 525-7161

INITIAL  
\$0  
PA

PN 23499

9210747

RECEIVED

AUG 14 1996

WATER RESOURCES  
WESTERN REGION

# WARRANTY DEED

FOR VALUE RECEIVED ERNEST R. THREET and BARBARA GAIL THREET,  
husband and wife

the Grantors, do hereby grant, bargain, sell and convey unto JON M. AGEE and REBECCA L. AGEE,  
husband and wife

the Grantees, whose address is 6856 MASON KNOB TRAIL, ROANOKE, VA 24018

the following described premises, to-wit:

Lot 2, Block 1, BARRETT HILLS ESTATES, Canyon County, Idaho,  
according to the plat filed in Book 18 of Plats, Page 59, records  
of said County.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees, their heirs and assigns  
forever. And the said Grantors do hereby covenant to and with the said Grantees, that they are the owners  
in fee simple of said premises; that said premises are free from all encumbrances; except for general taxes and assessments for  
the year 1992 and subsequent years, covenants, conditions, restrictions and easements of record;  
and that they will warrant and defend the same from all lawful claims whatsoever.

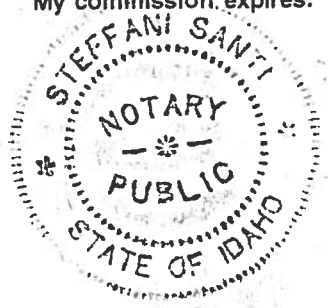
DATED: May 12, 1992

*Ernest R. Threet*  
ERNEST R. THREET

*Barbara Gail Threet*  
BARBARA GAIL THREET

STATE OF IDAHO  
COUNTY OF CANYON  
On this 18<sup>th</sup> day of May, 1992, before me a  
notary public, personally appeared ERNEST R. THREET  
AND BARBARA GAIL THREET, known or identified to me to  
be the person(s) who(se) name(s) is/are subscribed to the  
within instrument and acknowledged to me that he/she/they  
have executed the same.

*Steffani Santi*  
Notary Public  
Residing at NAMPA, Idaho  
My commission expires: 4-20-93



RECORDED  
92 MAY 18 PM 1 07  
NED J. KERR  
CANYON CNTY RECORDER  
BY *U. Chassey*  
REQUEST PIONEER - NAMPA  
TYPE Deed FEE 3.00

9210747

PIONEER TITLE COMPANY  
OF CANYON COUNTY

100 10TH AVE SOUTH  
NAMPA, IDAHO 83651

423 SOUTH KIMBALL  
CALDWELL, ID 83605

**WATER RESOURCES  
WESTERN REGION**

BASIS OF BEARING  
 0° 06' 14" E  
 880.44

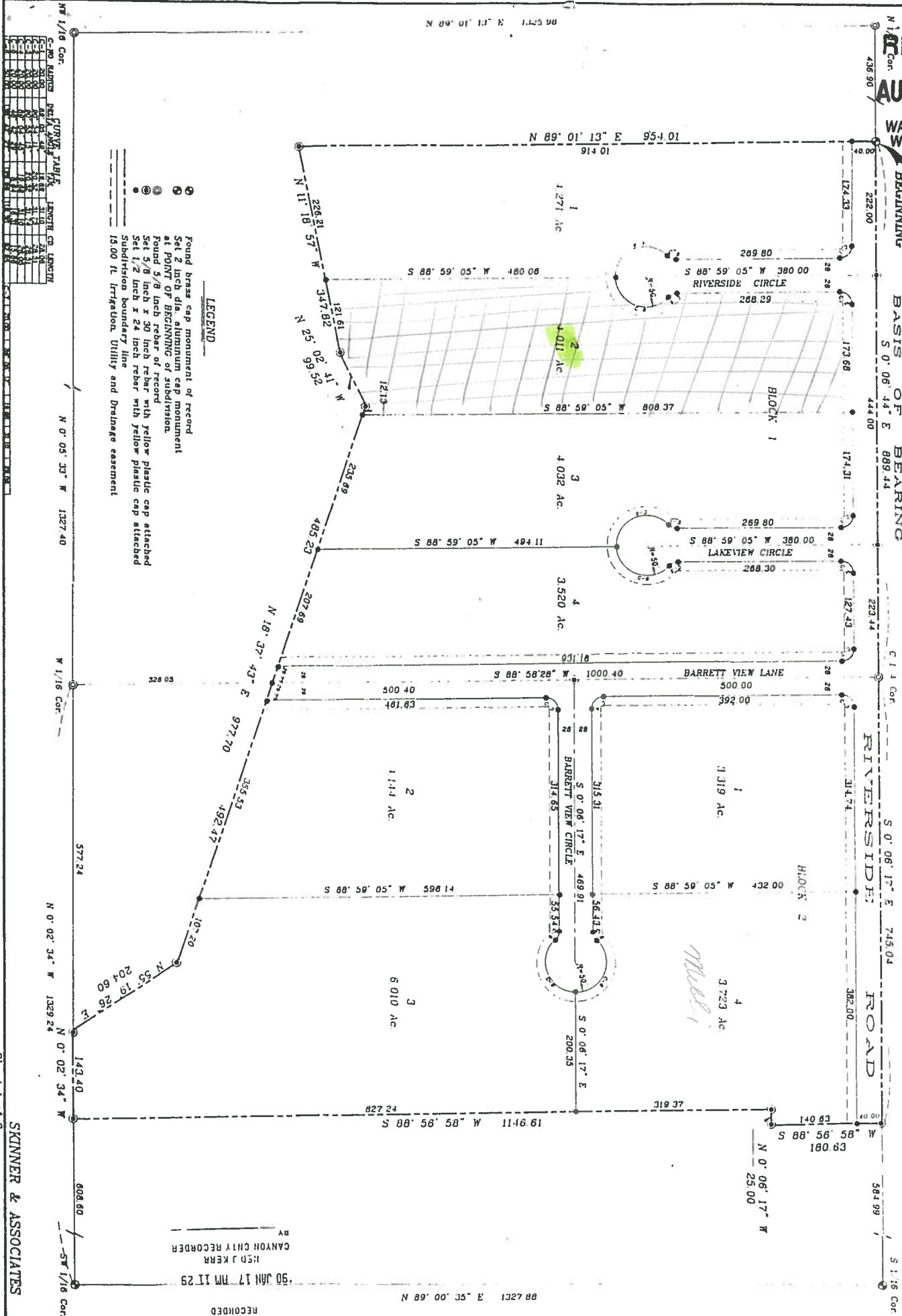
C I &amp; Cor

S 0° 06' 17" E 745.04  
RIVERSIDE

FROM

0 100 200  
SCALE 1" = 100'

**BARRETT - HILLS ESTATES**  
A PART OF THE SE 1/4 NW 1/4 & NE 1/4 SW 1/4 SECTION 17, TOWNSHIP 3 NORTH, RANGE 3 WEST, POISE MERIDIAN  
CANYON COUNTY, IDAHO  
1989



**SKINNER & ASSOCIATES**

RECORDED  
50 JUN 17 11 29  
JED J KERR  
CANYON CITY RECORDER

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: A63-02734A  
Date Received: 3/15/1990  
Receipt No: W011168  
Received By: \_\_\_\_\_

**COPY FOR  
YOUR FILES**

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

**COPY FOR  
YOUR FILES**

1. Name: BARRETT FARMS LTD 208-459-2418  
Address: 2308 TERRACE DR  
CALDWELL ID 83605

2. Date of Priority: NOV 4, 1948

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County |
|----------|-------|---------|--------|--------|-----|-----|--------|
| 03N      | 03W   | 17      |        | NE     | SW  |     | CANYON |

5. Description of diverting works:  
165'DEEP, 12" CASING, SURFACE PUMP, SPRINKLER SYSTEM

6. Water is used for the following purposes:

| Purpose    | From  | To    | C.F.S | (or) | A.F.A. |
|------------|-------|-------|-------|------|--------|
| IRRIGATION | 03/15 | 11/15 | 0.900 |      |        |

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:  
NONE

10. Place of Use:

| Township | Range | Section | 1/4 of | 1/4 | Lot | Use | Acres |
|----------|-------|---------|--------|-----|-----|-----|-------|
| 03N      | 03W   | 17      | SE     | NW  |     | IRR | 18.0  |
|          |       |         | NE     | SW  |     | IRR | 38.0  |
|          |       |         | NW     | SE  |     | IRR | 11.0  |

10. Place of Use: Continued

| Township | Range | Section | 1/4 of 1/4 | Lot | Use           | Acres |
|----------|-------|---------|------------|-----|---------------|-------|
|          |       |         |            |     | Section Acres | 67.0  |
|          |       |         |            |     | Total Acres   | 67.0  |

11. Place of use in counties: CANYON

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

13. Other Water Rights Used:  
A63-07394A

14. Remarks:  
THIS CLAIM IS SPLIT INTO THE FOLLOWING;  
A=0.90 CFS BARRETT FARMS  
B=0.08 CFS STATTNER  
C=0.08 CFS COONS  
D=0.03 CFS BARKER  
E=0.03 CFS DEVLIN

15. Basis of Claim: LICENSE

Water Right Number: 20741

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: A63-02734A

Date Received: 3/12/1990

Receipt No: W011168 RCH

Received By: \_\_\_\_\_

**RECEIVED**

MAR 15 1990

Department of Water Resources  
Western Regional Office

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

1. Name: BARRETT FARMS LTD. 208-459-2418  
Address: 2308 TERRACE DR.  
CALDWELL, ID 83605

2. Date of Priority: NOV 04, 1948

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

|          |       |         |        |        |     |     |        |
|----------|-------|---------|--------|--------|-----|-----|--------|
| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County |
| 03N      | 03W   | 17      | NE     | SW     |     |     | CANYON |

5. Description of diverting works:  
165' DEEP, 12" CASING, SURFACE PUMP, SPRINKLER SYSTEM

6. Water is used for the following purposes:

|            |       |       |        |      |        |
|------------|-------|-------|--------|------|--------|
| Purpose    | From  | To    | C.F.S. | (or) | A.F.A. |
| IRRIGATION | 03/15 | 11/15 | 0.900  |      |        |

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:  
NONE

10. Place of Use:

|          |       |         |        |     |     |     |       |
|----------|-------|---------|--------|-----|-----|-----|-------|
| Township | Range | Section | 1/4 of | 1/4 | Lot | Use | Acres |
| 03N      | 03W   | 17      | SE     | NW  |     | IRR | 18.0  |
|          |       |         | NE     | SW  |     | IRR | 38.0  |
|          |       |         | NW     | SE  |     | IRR | 11.0  |

Section Acres 67.0

A63-02734A

Page 1

Date: 03/12/90

**MICROFILMED**

AUG 18 1992

10. Place of Use: Continued

Total Acres 67.0

11. Place of use in counties: CANYON

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

13. Other Water Rights Used:  
A63-07394A

14. Remarks:  
THIS CLAIM IS SPLIT INTO THE FOLLOWING;  
A=0.90 CFS BARRETT FARMS  
B=0.08 CFS STATTNER  
C=0.08 CFS COONS  
D=0.03 CFS BARKER  
E=0.03 CFS DEVLIN

15. Basis of Claim: LICENSE  
Water Right Number: 20741

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 Organizations:

I do solemnly swear or affirm that I am General Partner of \_\_\_\_\_  
Title

Barrett Farms Ltd, that I have signed the foregoing  
Organization

document in the space below as General Partner of \_\_\_\_\_  
Title

Barrett Farms Ltd and that the statements contained in the  
Organization

foregoing document are true and correct.

Gordon S Barrett  
Signature of Authorized Agent

General Partner, Barrett Farms Ltd  
Title and Organization

March 14, 1990  
Date

State of Idaho )  
County of Canyon ) SS.

Subscribed and sworn (or affirmed) before me this 14th day

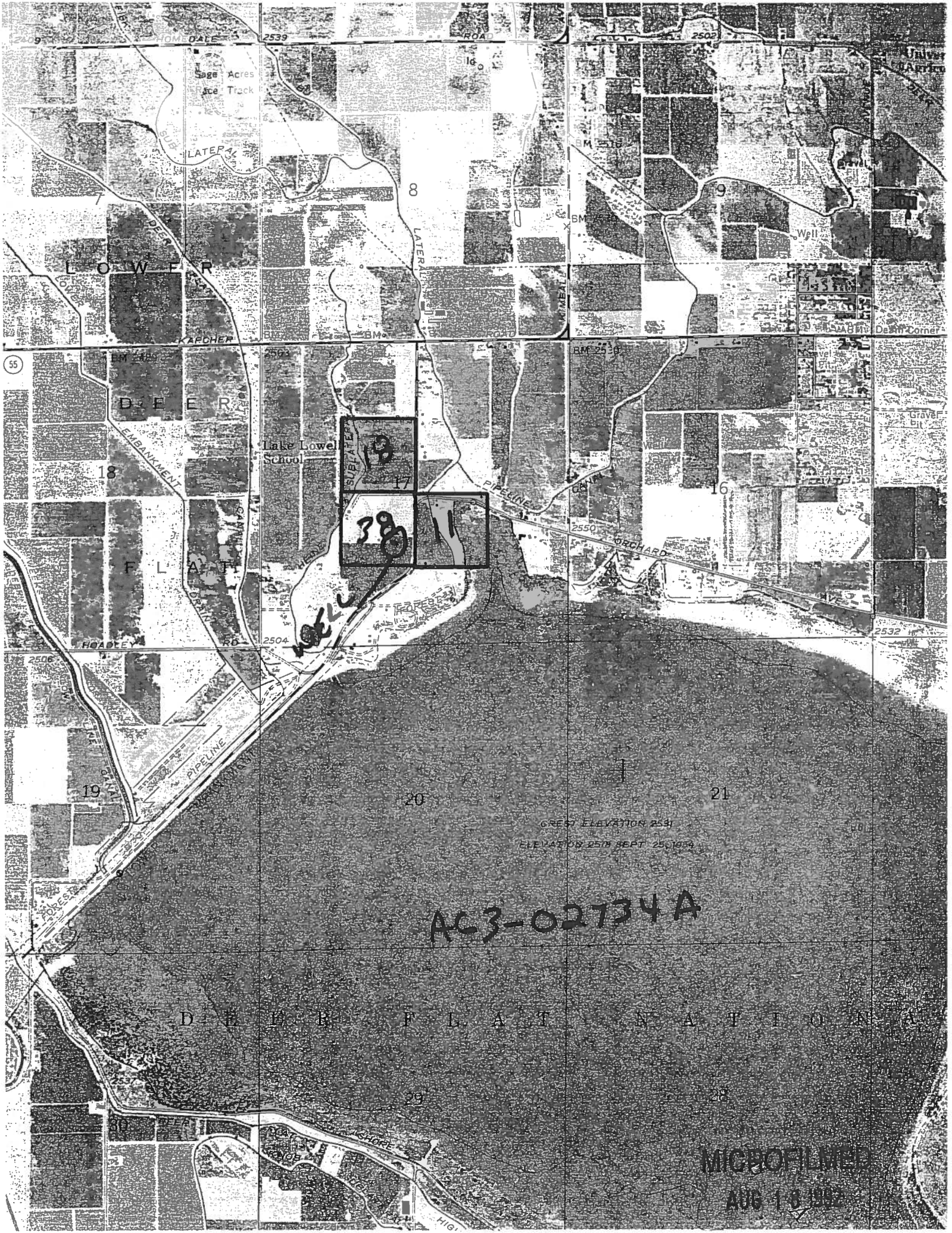
of March 19 90

Thomas M. Flechsig  
Notary Public

Seal

Residing at Caldwell

My Commission Expires 12-20-91



55

DEER

18

FLAT

19

PIPELINE

20

21

28

29

30

31

Lake Lowell School

2504

2506

2502

2503

2505

2507

2509

2511

19  
17  
38  
11

20

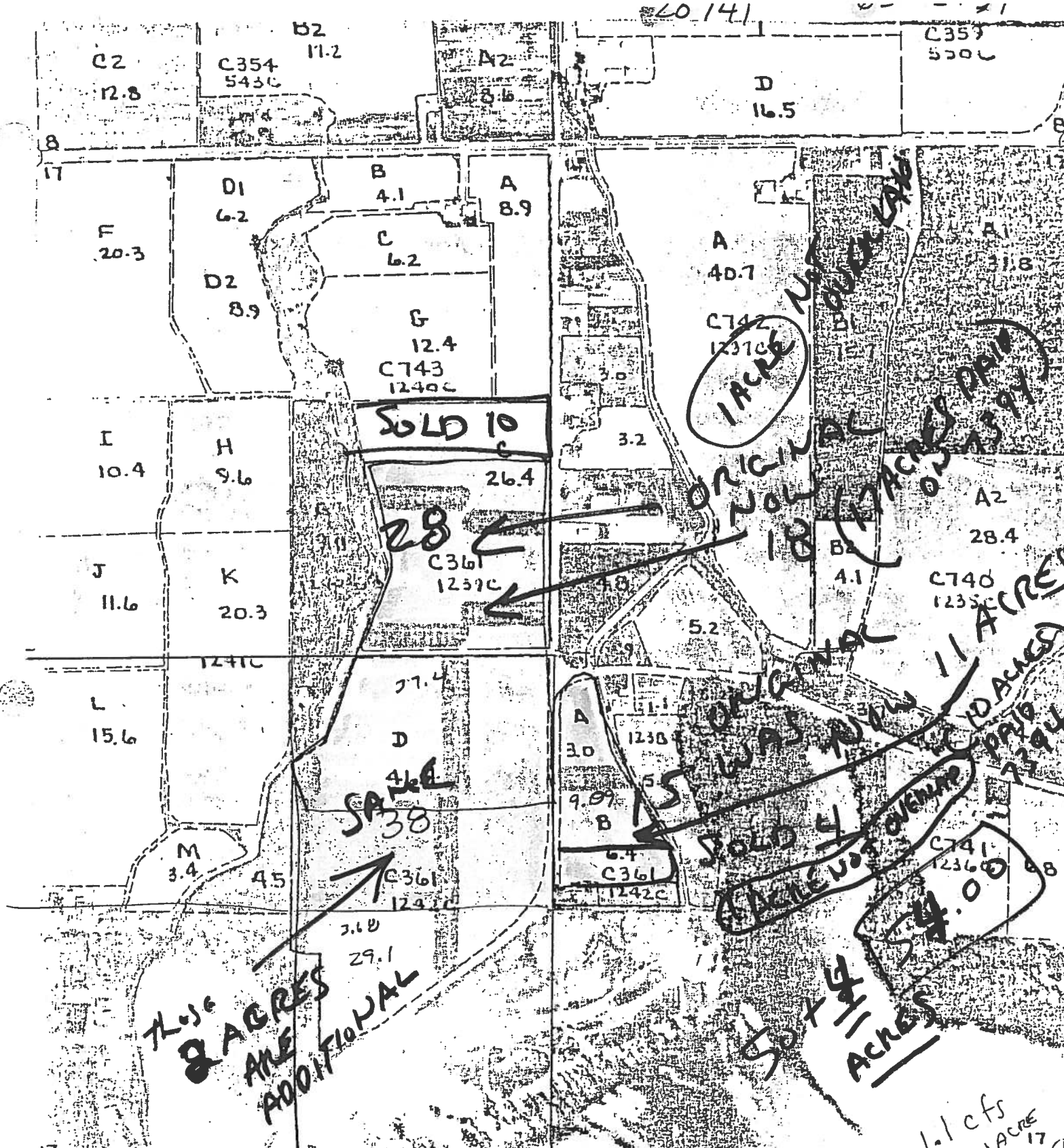
21

GREAT ELEVATION 2531  
ELEVATION 2518 SEPT 25, 1954

AC3-02734A

DEER FLAT NATIONAL

MICROFILMED  
AUG 18 1962



TOTAL DIMENSION WAS 1.1 cfs  
 SOLD 10 & 4 = 14 ACRES  
 A PORTION  
 $81 / 1.1 = .0135902 / \text{ACRE}$   
 67 LEFT + FACTOR  
 .90 CFS  
 A PORTION

MICROFILMED

AUG 18 1952

10/28/2006

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

RIGHT NUMBER: 63-32430

NAME AND ADDRESS: JON M AGE  
15603 RIVERSIDE RD  
CALDWELL ID 83607

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.050 CFS

Rights 63-32430 and 63-32433 when combined shall not exceed a total annual maximum diversion volume of 18.0 af at the field headgate, and the irrigation of 4 acres.

PRIORITY DATE: 11/04/1948

POINT OF DIVERSION:

T03N R03W S17 NESW Within CANYON County

PURPOSE AND  
PERIOD OF USE:

| <u>PURPOSE OF USE</u> | <u>PERIOD OF USE</u> | <u>QUANTITY</u> |
|-----------------------|----------------------|-----------------|
| IRRIGATION            | 03/01 11/15          | 0.050 CFS       |

PLACE OF USE: IRRIGATION Within CANYON County

T03N R03W S17 SENW 4.00

4 ACRES TOTAL

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

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 - License

Property is also known as Lot 2, Blk 1, Barrett Hills Estates.

Right Nos. 63-32429, 63-32431, 63-32432, 63-32433 and 63-32434 are also diverted through point of diversion described above.

This right is a split from former right 63-2734A.

This right when combined with all other rights shall provide no more than 0.02 cfs per acre nor more than 4.5 afa per acre at the field headgate for irrigation of the lands above.

Right includes accomplished change in point of diversion pursuant to Section 42-1425, Idaho Code.

09/13/2006

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

RIGHT NUMBER: 63-32430

NAME AND ADDRESS: JON M AGEE  
15603 RIVERSIDE RD  
CALDWELL ID 83607

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.050 CFS

Rights 63-32430 and 63-32433 when combined shall not exceed a total annual maximum diversion volume of 18.0 af at the field headgate, and the irrigation of 4 acres.

PRIORITY DATE: 11/04/1948

POINT OF DIVERSION:

T03N R03W S17 NESW Within CANYON County

PURPOSE AND  
PERIOD OF USE:

| <u>PURPOSE OF USE</u> | <u>PERIOD OF USE</u> | <u>QUANTITY</u> |
|-----------------------|----------------------|-----------------|
| IRRIGATION            | 03/01 11/15          | 0.050 CFS       |

PLACE OF USE: IRRIGATION Within CANYON County

T03N R03W S17 SENW 4.00

4 ACRES TOTAL

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

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 - License

Property is also known as Lot 2, Blk 1, Barrett Hills Estates.

Right Nos. ~~63-2734B~~, ~~63-2794B~~, 63-32429, 63-32431, 63-32432, 63-32433 and 63-32434 are also diverted through point of diversion described above.

This right is a split from former right 63-2734A.

Use of this right is combined with water from Wilder Irrigation District.

This right when combined with all other rights shall provide no more than 0.02 cfs per acre nor more than 4.5 afa per acre at the field headgate for irrigation of the lands above.

Right includes accomplished change in point of diversion pursuant to Section 42-1425, Idaho Code.

KEW  
10/28

NO - per  
phone  
con. 10/10  
will  
submit  
the  
NOE to  
correct  
KEW



# Idaho Department of Water Resources

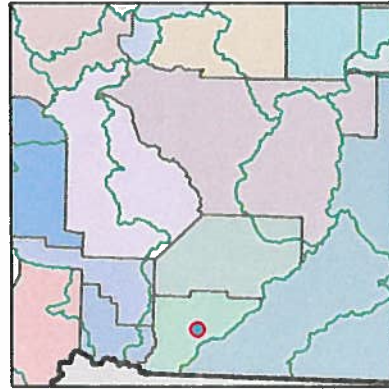
SRBA Recommendation:

**63-32430**

(Irrigation)

## Legend

-  Point of Diversion
-  Place of Use
-  Townships
-  PLS Sections
-  Quarter Quarters



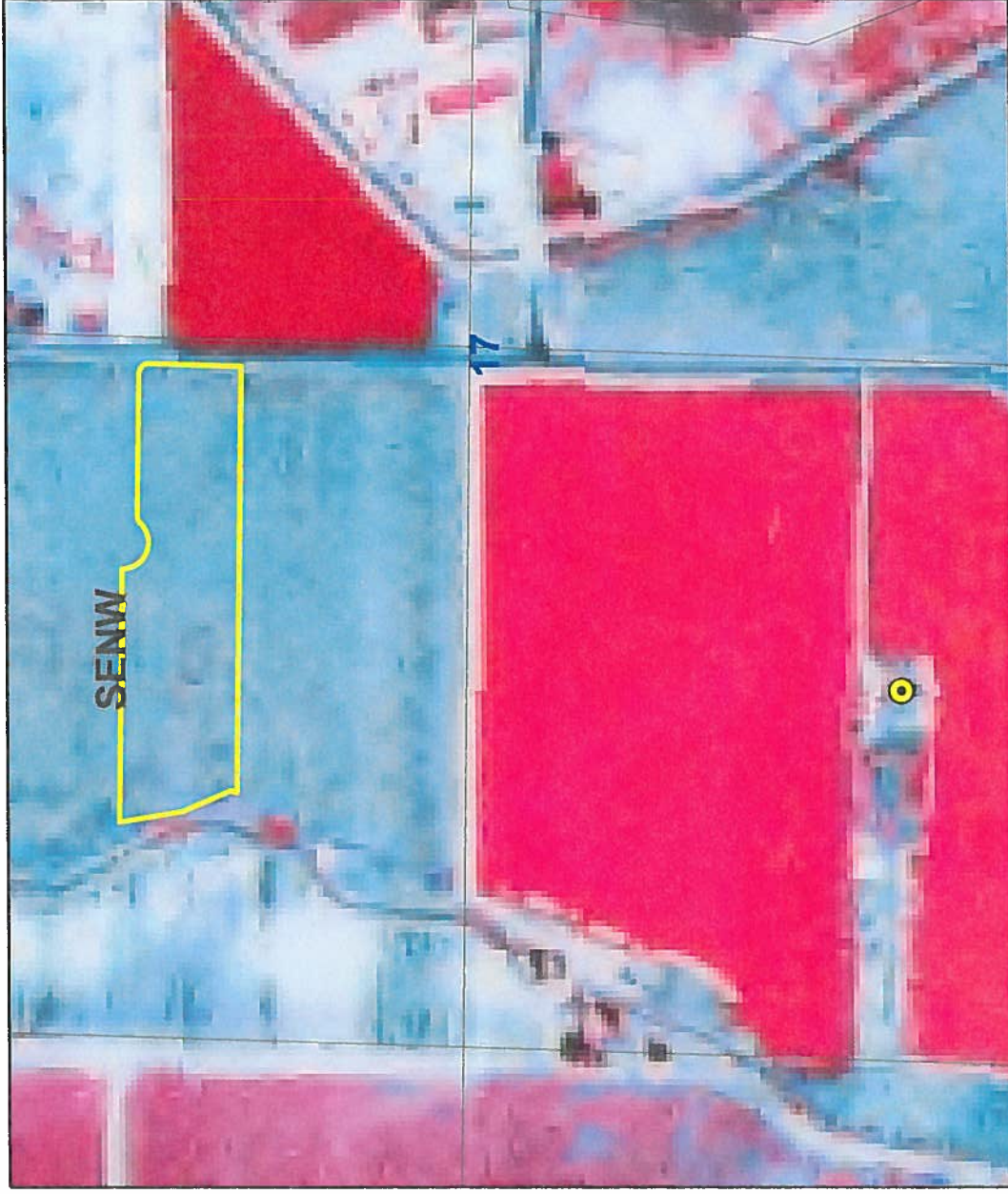
Canyon County  
IDWR Basin 63



R03W

SENW

T03N



0 0.1 0.2 Miles

Prepared by K. Walker  
On Monday, September 11, 2006  
1987/88 Aerial Photography

## IDAHO DEPARTMENT OF WATER RESOURCES

Adjudication Claim Report 63-32430

WATER RIGHT NUMBER: 63-32430

| <u>Owner Type</u> | <u>Name and Address</u>                                                     |
|-------------------|-----------------------------------------------------------------------------|
| Original Owner    | GEORGE G BARRETT<br>RT 4<br>CALDWELL, ID 83605                              |
| Original Owner    | BARRETT FARMS LTD<br>2308 TERRACE DR<br>CALDWELL, ID 83605<br>(208)459-2418 |
| Current Owner     | JON M AGEE<br>15603 RIVERSIDE RD<br>CALDWELL, ID 83607<br>(208)454-3960     |

Priority Date: 11/04/1948

Basis: License

Status: Active

Source

GROUND WATER

Beneficial Use

IRRIGATION

| <u>From</u> | <u>To</u> |
|-------------|-----------|
| 03/15       | 11/15     |

Diversion Rate

0.050 CFS

Annual Volume18.0 (4x4.5)  
18.0Total Diversion: 0.050 CFSLocation of Point(s) of Diversion

GROUND WATER

CANYON County

NE1/4SW1/4

Sec. 17, Twp 03N, Rge 03W, B.M.

Place of Use

IRRIGATION

| Twp | Rge | Sec | NE |    |    |    | NW |    |    |     | SW |    |    |    | SE |    |    |    | Totals |
|-----|-----|-----|----|----|----|----|----|----|----|-----|----|----|----|----|----|----|----|----|--------|
|     |     |     | NE | NW | SW | SE | NE | NW | SW | SE  | NE | NW | SW | SE | NE | NW | SW | SE |        |
| 03N | 03W | 17  |    |    |    |    |    |    |    | 4.0 |    |    |    |    |    |    |    |    | 4.0    |

Total Acres: 4

Conditions of Approval:

- This right is a split from former right 63-2734A.

Remarks:

F05

Comments:

J01

in office  
review by  
KW 9/12/06

Not on Lic  
Rec. standard season

Lic says  
NWSE - see log  
Replacement  
well in 1971

parent →

| <u>Basin</u> | <u>Sequence</u> | <u>Suffix</u> | <u>Rate(cfs)</u> | <u>Source Table</u>          |
|--------------|-----------------|---------------|------------------|------------------------------|
| 63           | 2734            | B             | 0.07             | wrAdjudicationRecommendation |
| 63           | 7394            |               | 1.60             | wrWaterRight                 |
| 63           | 7394            | B             | 0.03             | wrAdjudicationRecommendation |
| 63           | 32429           |               | 0.80             | wrAdjudicationClaim          |
| 63           | 32429           |               | 0.80             | wrAdjudicationRecommendation |
| 63           | 32430           |               | 0.05             | wrAdjudicationClaim          |
| 63           | 32430           |               | 0.05             | wrAdjudicationRecommendation |
| 63           | 32431           |               | 0.05             | wrAdjudicationClaim          |
| 63           | 32431           |               | 0.05             | wrAdjudicationRecommendation |
| 63           | 32432           |               | 1.26             | wrAdjudicationClaim          |
| 63           | 32432           |               | 0.59             | wrAdjudicationRecommendation |
| 63           | 32433           |               | 0.07             | wrAdjudicationClaim          |
| 63           | 32433           |               | 0.03             | wrAdjudicationRecommendation |
| 63           | 32434           |               | 0.07             | wrAdjudicationClaim          |
| 63           | 32434           |               | 0.02             | wrAdjudicationRecommendation |

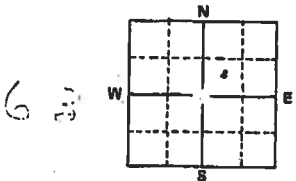
USE TYPEWRITER OR  
BALL POINT PEN

State of Idaho  
Department of Reclamation

# WELL DRILLER'S REPORT

State law requires that this report be filed with the State Reclamation Engineer  
within 30 days after completion or abandonment of the well.

Received  
9-28-71  
D. H. A.

| <b>1. WELL OWNER</b><br>Name <u>Mrs Leo Barrett</u><br>Address <u>Rt 4 Caldwell Idaho</u><br>Owner's Permit No <u>63-2395594</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       | <b>7. WATER LEVEL</b><br>Static water level <u>60</u> feet below land surface<br>Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow <u>600</u><br>Temperature <u>    </u> ° F. Quality <u>    </u><br>Artesian closed-in pressure <u>    </u> p.s.i.<br>Controlled by <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------|-------|--|----------|-------|--|------|----|-----|----|----|---|----|--|--|--|----|---|-----|--|--|--|----|---|---|------|--|--|----|---|---|----------|--|--|----|---|---|--------|--|--|----|---|----|---------------------|--|--|----|----|----|------------|--|--|----|----|----|------------|--|--|----|----|-----|------------|--|--|----|-----|-----|---------------|--|--|----|-----|-----|--------------------|--|--|----|-----|-----|-------------------|--|--|----|-----|-----|------------------------|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|-------------------------------------------------------------------------------|--|--|--|--|--|-----------------|--|--|--|--|--|--------|--|--|--|--|--|
| <b>2. NATURE OF WORK</b><br><input type="checkbox"/> New well <input type="checkbox"/> Deepened <input checked="" type="checkbox"/> Replacement<br><input type="checkbox"/> Abandoned (describe method of abandoning)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       | <b>8. WELL TEST DATA</b><br><input checked="" type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Other<br>Discharge G.P.M. <u>600</u> Draw Down <u>Long to Bottom of permeable pump</u> Hours Pumped <u>    </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| <b>3. PROPOSED USE</b><br><input checked="" type="checkbox"/> Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test<br><input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       | <b>9. LITHOLOGIC LOG</b> <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>20</td><td>0</td><td>22</td><td></td><td></td><td></td></tr><tr><td>16</td><td>0</td><td>120</td><td></td><td></td><td></td></tr><tr><td>20</td><td>0</td><td>2</td><td>soil</td><td></td><td></td></tr><tr><td>20</td><td>2</td><td>5</td><td>hard pan</td><td></td><td></td></tr><tr><td>20</td><td>5</td><td>7</td><td>gravel</td><td></td><td></td></tr><tr><td>20</td><td>7</td><td>22</td><td>hard gravel compact</td><td></td><td></td></tr><tr><td>16</td><td>22</td><td>55</td><td>sandy clay</td><td></td><td></td></tr><tr><td>16</td><td>55</td><td>75</td><td>sandy clay</td><td></td><td></td></tr><tr><td>16</td><td>75</td><td>110</td><td>sandy clay</td><td></td><td></td></tr><tr><td>12</td><td>110</td><td>120</td><td>gravelly sand</td><td></td><td></td></tr><tr><td>12</td><td>120</td><td>135</td><td>clay &amp; sand streak</td><td></td><td></td></tr><tr><td>12</td><td>135</td><td>150</td><td>sandy clay streak</td><td></td><td></td></tr><tr><td>12</td><td>150</td><td>165</td><td>muddy sand, sandy clay</td><td></td><td></td></tr><tr><td colspan="6">Started pump and open discharge. Installed small gravel below pump into sprinkler lines and started sprinkling. put in about 40 yd of gravel.</td></tr><tr><td colspan="6">I called Mrs Leo Barrett today and well is done good and she is well pleased.</td></tr><tr><td colspan="6">By A. E. Hosack</td></tr><tr><td colspan="6">001545</td></tr></tbody></table> |                        | Hole Diam. | Depth |  | Material | Water |  | From | To | Yes | No | 20 | 0 | 22 |  |  |  | 16 | 0 | 120 |  |  |  | 20 | 0 | 2 | soil |  |  | 20 | 2 | 5 | hard pan |  |  | 20 | 5 | 7 | gravel |  |  | 20 | 7 | 22 | hard gravel compact |  |  | 16 | 22 | 55 | sandy clay |  |  | 16 | 55 | 75 | sandy clay |  |  | 16 | 75 | 110 | sandy clay |  |  | 12 | 110 | 120 | gravelly sand |  |  | 12 | 120 | 135 | clay & sand streak |  |  | 12 | 135 | 150 | sandy clay streak |  |  | 12 | 150 | 165 | muddy sand, sandy clay |  |  | Started pump and open discharge. Installed small gravel below pump into sprinkler lines and started sprinkling. put in about 40 yd of gravel. |  |  |  |  |  | I called Mrs Leo Barrett today and well is done good and she is well pleased. |  |  |  |  |  | By A. E. Hosack |  |  |  |  |  | 001545 |  |  |  |  |  |
| Hole Diam.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Depth |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Material               |            | Water |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | From  | To                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        | Yes        | No    |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0     | 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0     | 120                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0     | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | soil                   |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2     | 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | hard pan               |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5     | 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | gravel                 |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 7     | 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | hard gravel compact    |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 22    | 55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | sandy clay             |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 55    | 75                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | sandy clay             |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 75    | 110                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | sandy clay             |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 110   | 120                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | gravelly sand          |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 120   | 135                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | clay & sand streak     |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 135   | 150                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | sandy clay streak      |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 150   | 165                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | muddy sand, sandy clay |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| Started pump and open discharge. Installed small gravel below pump into sprinkler lines and started sprinkling. put in about 40 yd of gravel.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| I called Mrs Leo Barrett today and well is done good and she is well pleased.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| By A. E. Hosack                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| 001545                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| <b>4. METHOD DRILLED</b><br><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Rotary <input type="checkbox"/> Dug <input type="checkbox"/> Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| <b>5. WELL CONSTRUCTION</b><br>Diameter of hole <u>20</u> inches Total depth <u>20</u> feet<br>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete<br>Thickness <u>3/8</u> inches Diameter <u>16</u> inches From <u>0</u> feet To <u>110</u> feet<br><u>2</u> inches <u>12</u> inches <u>0</u> feet <u>165</u> feet<br><u>    </u> inches <u>    </u> inches <u>    </u> feet <u>    </u> feet<br><u>    </u> inches <u>    </u> inches <u>    </u> feet <u>    </u> feet<br><u>    </u> inches <u>    </u> inches <u>    </u> feet <u>    </u> feet<br>Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>How perforated? <input checked="" type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch<br>Size of perforation <u>4</u> inches by <u>3</u> inches<br>Number <u>16</u> perforations From <u>0</u> feet To <u>165</u> feet<br><u>    </u> perforations <u>    </u> feet <u>    </u> feet<br><u>    </u> perforations <u>    </u> feet <u>    </u> feet<br>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Manufacturer's name <u>    </u><br>Type <u>    </u> Model No. <u>    </u><br>Diameter <u>    </u> Slot size <u>    </u> Set from <u>    </u> feet to <u>    </u> feet<br>Diameter <u>    </u> Slot size <u>    </u> Set from <u>    </u> feet to <u>    </u> feet<br>Gravel packed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size of gravel <u>30</u><br>Placed from <u>0</u> feet to <u>165</u> feet<br>Surface seal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No To what depth <u>22</u> feet<br>Material used in seal <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Puddling clay |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| <b>6. LOCATION OF WELL</b><br>Sketch map location must agree with written location.<br><br>County <u>Canyon county Ida</u><br><u>NF 5 1/4 Sec. 17 T. 3 N/S. R. 3 1/4</u><br>Sketch map location must agree with written location.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |       | <b>10.</b><br>Work started <u>Mar 29/71</u> finished <u>Apr 14 71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |
| <b>11. DRILLER'S CERTIFICATION</b><br>This well was drilled under my supervision and this report is true to the best of my knowledge.<br><u>A. E. Hosack</u><br>Driller's or Firm's Name <u>308 North Millland Blvd</u> Number <u>    </u><br>Address <u>A. E. Hosack</u> Date <u>July 16 71</u><br>Signed By <u>    </u> Date <u>    </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |            |       |  |          |       |  |      |    |     |    |    |   |    |  |  |  |    |   |     |  |  |  |    |   |   |      |  |  |    |   |   |          |  |  |    |   |   |        |  |  |    |   |    |                     |  |  |    |    |    |            |  |  |    |    |    |            |  |  |    |    |     |            |  |  |    |     |     |               |  |  |    |     |     |                    |  |  |    |     |     |                   |  |  |    |     |     |                        |  |  |                                                                                                                                               |  |  |  |  |  |                                                                               |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |

USE ADDITIONAL SHEETS IF NECESSARY

Comment: Transfer reflects new well to irrigate new owner's share of original license. Right No. 63-02734 is split into parts A and B thru this transfer.

IDAHO DEPARTMENT OF WATER RESOURCES  
ADJUDICATION CLAIM POU REVIEW REPORT  
ADJUDICATION CLAIM NUMBER: 63-2734A

03/15/2006

1

| Right # | Type        | Twp | Rge | Sec | QQ | Q  | Lot | Purpose of Use | Acres/Total | Name              |
|---------|-------------|-----|-----|-----|----|----|-----|----------------|-------------|-------------------|
| 734A    | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 18/67       | BARRETT FARMS LTD |
| 734B    | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 5/5         | TINA STATTNER     |
| 734C    | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 5/5         | SANDRA I COON     |
| 7394A   | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 17/73       | BARRETT FARMS LTD |
| 7394B   | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 5/5         | DAVID STATTNER    |
| 7394C   | Claim       | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 5/5         | RAYMOND L COON    |
| 734A    | Water Right | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 28/79       | GEORGE G BARRETT  |
| 7394    | Water Right | 03N | 03W | 17  | SE | NW |     | IRRIGATION     | 27/83       | BARRETT FARMS LTD |
| 71377   | Water Right | 03N | 03W | 17  | SE | NW |     | DOMESTIC       |             | RAYMOND L COON    |
| 734A    | Claim       | 03N | 03W | 17  | NE | SW |     | IRRIGATION     | 38/67       | BARRETT FARMS LTD |
| 7394A   | Claim       | 03N | 03W | 17  | NE | SW |     | IRRIGATION     | 36/73       | BARRETT FARMS LTD |
| 734A    | Water Right | 03N | 03W | 17  | NE | SW |     | IRRIGATION     | 38/79       | GEORGE G BARRETT  |
| 7394    | Water Right | 03N | 03W | 17  | NE | SW |     | IRRIGATION     | 36/83       | BARRETT FARMS LTD |
| 734A    | Claim       | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 11/67       | BARRETT FARMS LTD |
| 734E    | Claim       | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 2/2         | RITA JO DEVLIN    |
| 7394A   | Claim       | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 10/73       | BARRETT FARMS LTD |
| 76978   | Claim       | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 5/5         | JUNE L BAKER      |
| 734A    | Water Right | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 13/79       | GEORGE G BARRETT  |
| 734B    | Water Right | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 2/2         | RITA JO DEVLIN    |
| 7394    | Water Right | 03N | 03W | 17  | NW | SE |     | IRRIGATION     | 10/83       | BARRETT FARMS LTD |
| 74132   | Water Right | 03N | 03W | 17  | NW | SE |     | STOCKWATER     |             | LYLE BARKER       |
| 74132   | Water Right | 03N | 03W | 17  | NW | SE |     | DOMESTIC       |             | LYLE BARKER       |
| 76406   | Water Right | 03N | 03W | 17  | NW | SE |     | DOMESTIC       |             | LARRY L SCHROEDER |

# Receipt Details for ID W011168

| Status | Adjustment Type  | Version |
|--------|------------------|---------|
|        | Adjusted Receipt | 1       |

## General Information:

| Date Received        | Date Deposited     | Region  | Total Amount | Payment Type |
|----------------------|--------------------|---------|--------------|--------------|
| 3/16/1990 8:30:32 AM | 3/16/1990          | Western | \$54.00      | Check        |
| <b>Payer</b>         | BARRETT FARMS LTD. |         |              |              |

## Account Information:

| Check #              | Account #                 | Credit Card Name | Authorization # |
|----------------------|---------------------------|------------------|-----------------|
| 751                  |                           |                  |                 |
| Card Expiration Date | Credit Card Transaction # |                  |                 |
|                      |                           |                  |                 |

**Comment** ADJUDICATION CLAIM FEE

## Fee Detail:

| Amount  | Description            | PCA    | Fund | Fund Detail | Subsidiary | Object |
|---------|------------------------|--------|------|-------------|------------|--------|
| \$54.00 | ADJUDICATION CLAIM FEE | 410162 | 9337 | 0           | 0          | 6490   |

## Refund(s):

| Amount | Payee | Date | Document Number |
|--------|-------|------|-----------------|
|--------|-------|------|-----------------|

## Water Right Information:

| Basin Number | Sequence Number | Split Suffix | Amount  | Type  |
|--------------|-----------------|--------------|---------|-------|
| 63           | 2734            | A            | \$54.00 | Claim |

Print Report

# State of Idaho

## License and Certificate of Water Right

Water License No. 20741 Amount 1.1 c.f.s.  
 Water District No. Priority Nov. 4, 1948

THIS IS TO CERTIFY that GEORGE G. BARRETT  
 of Caldwell, Idaho, made application for a permit to appropriate the  
 public waters of the State of Idaho, dated November 4, 1948; that Permit No. 20741  
 was issued under said application; that Certificate of Completion of works, with a carrying capacity of  
 1.1 second feet, was issued thereunder on November 18, 1953, showing that said works  
 were completed on the 13 day of November, 1953; and that on the 12th  
 day of November, 1959,

GEORGE G. BARRETT

of Caldwell, State of Idaho, made proof to the satisfaction of the  
 State Reclamation Engineer of Idaho, of the right to use the waters of a well  
 , a tributary of subterranean flow, for the purpose of irrigation  
 , under Use Permit No. 20741 of the Department of Reclamation  
 and that said right to the use of said waters has been perfected in accordance with the laws of Idaho,  
 and is hereby confirmed by the State Reclamation Engineer of Idaho and entered of record in Volume  
 11 of Licenses at page 6902, on the 23 day of June, 1960;  
 The right hereby confirmed dates from November 4, 1948;

The Point of Diversion is located  
 in the NW 1/4 SE 1/4, Sec. 17, Tp. 3 N., R. 3 W., B. M. Canyon County

That the amount of water to which such right is entitled and hereby confirmed, for the purposes  
 aforesaid, is limited to an amount actually needed and beneficially used for said purposes, and shall  
 not exceed 1.1 cubic feet per second.

Description and location of use:

| Twp. | Range | Sec. | Forty-acre Tract                       | No. Acres<br>Described in Permit | No. Acres<br>Actually Irrigated |
|------|-------|------|----------------------------------------|----------------------------------|---------------------------------|
| 3 N. | 3 W.  | 17   | SE 1/4 NW 1/4                          | 30                               | 28                              |
|      |       |      | NE 1/4 SW 1/4                          | 35                               | 36                              |
|      |       |      | NW 1/4 SE 1/4                          | 15                               | 15                              |
|      |       |      | Total number of acres to be irrigated: |                                  | 81                              |

The right to the use of the water aforesaid hereby confirmed is restricted to the lands or place  
 of use herein described, as provided by the laws of Idaho.

WITNESS the seal and signature of the State Reclamation Engineer, affixed at Boise, Idaho, this  
 23 day of June, 1960.

GEO. N. CARTER

State Reclamation Engineer.

(SEAL)

STATE OF IDAHO  
DEPARTMENT OF RECLAMATION  
BOISE, IDAHO

## REPORT OF ENGINEER

Permit No. 20741

This proof is for Beneficial Use In Water District No. \_\_\_\_\_

1. Name of applicant George G. Barrett
2. Source of water supply: Subterranean Flow (two wells)
3. Location of point of diversion: Is in the SE $\frac{1}{4}$ NW $\frac{1}{4}$  and NW $\frac{1}{4}$ SE $\frac{1}{4}$  of Section 17  
T. 3 N. R. 3 W. County of Canyon

4. Describe works as they exist, giving dimensions and capacities of same: 102' x 8' cgd 72'

h = 25' lift = 50' 4 stages 8" 20 hp. H.S. Motor 220 V.  
Under G.E. Control on East in Pump house  
Cook Tank #10903. 6" del into large concrete tank (desanding)  
20 hp. G.E. motor with Peerless Turbocentrifugal P83X4XB  
#162443 Pump house 8' x 10' gal. inclosed pump house.

5. Water is used for: Irrigation

6. State whether or not water has been turned into works of diversion: yes

7. List legal subdivisions of lands to be irrigated. If proof is for beneficial use, give exact number of acres under cultivation in each forty-acre tract. (Describe manner and place of use if other than irrigation):

SE $\frac{1}{4}$ NW $\frac{1}{4}$ , NE $\frac{1}{4}$ SW $\frac{1}{4}$ , NW $\frac{1}{4}$ SE $\frac{1}{4}$  all in Sec. 17, T. 3 N., R. 3 W., B.M.

Water pumped into large concrete tank sand settles  
second water and pump delivers water thru  
sprinkler system

(Submit map on attached plat, showing location and details of above description.)

8. What large stream would the water here appropriated finally reach?

Remarks:

Water thru Sprinkling Meter

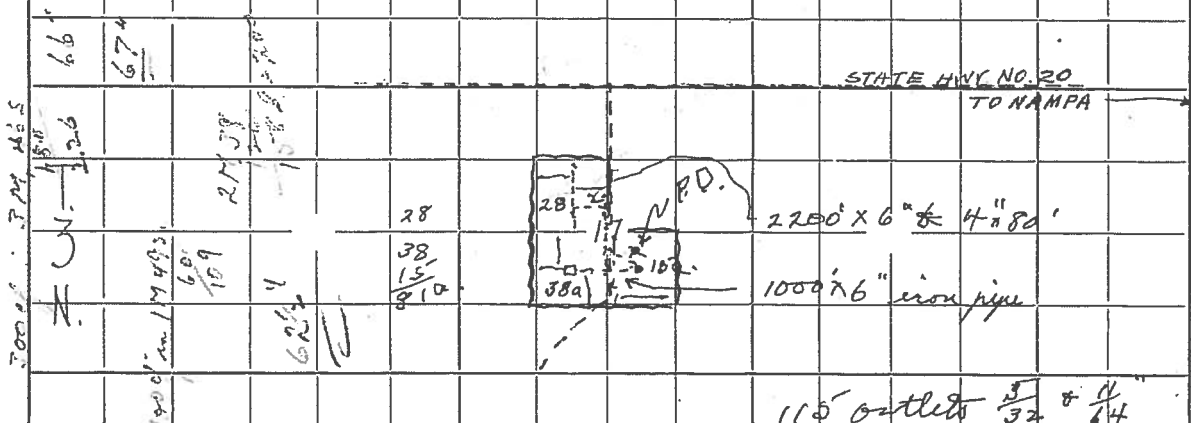
Mr. Barrett along

This examination was made on the 2nd day of June, 1960

(Signed) E. H. Humphrey Examiner.

20741

R-3W.



115' outlets  $\frac{3}{32}$  &  $\frac{1}{4}$ "

Rainbirds &  
Rain troll

$T = 52^{\circ}F$   
 Sub. = 3  
 Area = 81 acres  
 $Q = 162\frac{1}{2}$  inches .55  
 $1.25$  cfs 1.1

c/w issued for 1.1 cfs

Nº 20741  
63-2734

APPLICATION FOR PERMIT  
To Appropriate the Public Waters of the State of Idaho

APPLICATION No. 28379  
PERMIT No. 20741  
DISTRICT No.

1. Name of Applicant: GEORGE G. BARRETT

Postoffice address: 2107 Cleveland Blvd., Caldwell County: Canyon State: Idaho

I. If applicant is a corporation, give:

- (a) Date and place of incorporation:
- (b) Amount of capital stock:
- (c) Amount paid in:
- (d) Names and addresses of directors:

II. The financial resources of the applicant are:

- (b) Treasury stock:
- (d) Other resources:
- (a) Cash on hand:
- (c) Bonds to be issued:

2. Quantity of water claimed: 80 inches or 1.6 cubic feet per second.

3. Source of water supply: Subterranean flow (two wells) which is a tributary of

4. Location of points of diversion: feet distant from the  
corner of Section , T. , R. , B.M., and is in the NW $\frac{1}{4}$  SE $\frac{1}{4}$  and NE $\frac{1}{4}$  SW $\frac{1}{4}$   
of Section 17 , T. 3 N. , R. 3 W. , B.M., County of Canyon

5. Water is to be used for Irrigation

6. If for mining, milling, power or manufacturing purposes, give:

- (a) Point of use of water: feet distant from corner of Section  
T. , R. , B.M., in the of Section , T. , R. , B.M.
- (b) Amount of power generated: H.P., under feet head.
- (c) Water is to be returned to at a point feet  
distant from the corner of Section , T. , R. , B.M., in the  
of Section , T. , R. , B.M.

7. Estimated cost of works: \$ 7,500.00

8. Kind of works: Two wells, pumps and sprinkler system

9. Height of dam feet; length of dam at top feet; length of dam at bottom  
feet; material used in dam:

10. Size of headgate: Width feet; height feet.

11. Ditch: Width at bottom feet; width at water line feet; depth of water feet;  
dimensions of flume:

Diameter of pipe inches; length of conduit miles.  
Average grade per mile feet.

12. The time required for the completion of such work is Five (5) years.

13. The time required for the complete application of the water to the proposed use is Six (6) additional years.

14. The land to be irrigated is described in the following tabulation: See remarks.

15. Existing water rights and/or valid permits appurtenant to the lands to be irrigated are: None

16. (a) Is reservoir to be used? If so, fill in (b) and (c) below:  
 (b) Name of Reservoir and number of Storage Permit:  
 (c) Date of filing of Application for Storage Permit and Name of Applicant:

BE IT KNOWN THAT The undersigned hereby makes application for permit to appropriate the public water of the State of Idaho as herein set forth.

GEORGE G. BARRETT      Applicant.

By

Agent.

Date of first receipt at Department of Reclamation: 4:00 P. M. November 4, 1948

Returned to applicant for correction:

Corrected application received:

Approval of State Reclamation Engineer

The number of this permit is 20741

Recorded in Book 74

Page 20741      Approved November 13, 1948

Recorded in Book 74 Page 20741 Approved November 13, 1948  
This is to certify that I have examined the within application for a permit to appropriate the public waters of the State of Idaho, and hereby approve the same, subject to the following limitations and conditions:

Bond in the sum of \$ \_\_\_\_\_ to be filed on or before \_\_\_\_\_

Bond in the sum of \$ \_\_\_\_\_ to be filed on or before \_\_\_\_\_ and to continue diligently and uninterruptedly to completion,  
Work to begin on or before January 13, 1964 \_\_\_\_\_  
\_\_\_\_\_ if interrupted by circumstances over which permit holder has no control.

unless temporarily interrupted by circumstances over which permit holder has no control. One-fifth of the work above specified to be completed on or before May 13, 1951.

One-fifth of the work above specified to be completed on or before May 18, 1953  
The whole of said work to be completed on or before November 13, 1953

The whole of said work to be completed on or before November 13, 1955  
Beneficial use of water appropriated in accordance herewith, to be made on or before November 13, 1959

WITNESS My hand this 13th day of November, 1948

MARK R. KULP  
State Reclamation Engineer.

IN TESTIMONY WHEREOF, WE, C. A. ROBINS, Governor of the State of Idaho,  
and J. D. "CY" PRICE, Secretary of State of the State of Idaho, have caused this instrument to

be executed in the name of the State of Idaho, and caused the Great Seal of the State of Idaho to be hereunto affixed, this 13th day of November, 1948.

STATE OF IDAHO

Countersigned:

STATE OF IDAHO

(SEAL)

By C. A. ROBINS

GOBETTLER.

By J. D. "CY" PRICE

Secretary of State.

## REMARKS:

14.

| Twp.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Range | Sec. | NE¼ |     |     |     | NW¼ |     |     |     | SW¼ |     |     |     | SE¼ |     |     |     | Totals |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |       |      | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ |        |
| 3 N.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 3 W.  | 17   |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | 80  |        |
| <p style="text-align: center;">APPLICATION FOR AMENDMENT<br/>TO PERMIT TO APPROPRIATE THE PUBLIC WATERS<br/>OF THE STATE OF IDAHO, NO. 20741</p> <p>Comes now George G. Barrett and represents to the State Reclamation Engineer of the State of Idaho: That he is the owner and holder of Permit to appropriate the Public Waters of the State of Idaho, No. 20741; That the points of diversion is described in said Permit as being located in the NE¼ SW¼ and NW¼ SE¼ Section 17, Township 3 North, Range 3 West, B.M.</p> <p>That he now requests that the points of diversion be changed to points located in the SE¼ NW¼ and NW¼ SE¼ Section 17, Twp. 3 North, Range 3 West, B.M., as per map above referred to.</p> <p>That his reasons for desiring to make such change are as follows: It has been found to be more convenient and also more economical to locate the well in the SE¼ NW¼ of the section, as this is a higher point. That no one will be injured by such change, and that such change will be made at Permit Holder's own risk. Signed at Boise, Idaho this 15th day of February, 1950.</p> <p style="text-align: right;">GEORGE G. BARRETT</p> <p>Date of receipt at Department of Reclamation February 15, 1950.</p> <p style="text-align: center;">APPROVAL OF THE STATE RECLAMATION ENGINEER</p> <p>I, Mark R. Kulp, State Reclamation Engineer of the State of Idaho, hereby approve the above and foregoing application for amendment to Permit to appropriate the Public Waters of the State of Idaho, No. 20741. This approval constitutes a new permit and is issued as an amendment to the original permit to which it refers, and of which it becomes a part, and said application is approved only insofar as the rights of others will not be adversely affected thereby.</p> <p style="text-align: right;">MARK R. KULP<br/>State Reclamation Engineer</p> |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |

Permit No. 20741

## CERTIFICATE OF COMPLETION OF WORKS

TO ALL WHOM IT MAY CONCERN:

This is to certify that GEORGE G. BARRETT of Caldwell, County of Canyon, and State of Idaho, the holder of Permit No. 20741, issued upon Application No. 28379 bearing date of priority of November 4, 1948, authorizing the diversion of 1.6 second feet of the waters of subterranean flow from two wells, County of Canyon, State of Idaho; for irrigation purposes, has fully complied with the provisions of the laws of the State of Idaho relating to the proof of completion of the works of diversion set out and described in said Permit; that said works are adequate for diverting and conveying to the place of intended use 1.1 second feet of the waters of one well; that the point of diversion of said waters is in the NW $\frac{1}{4}$  SE $\frac{1}{4}$  Section 17, Township 3 North, Range 3 West, B.M., and that the lands proposed to be irrigated by the use of said water are described as follows, to-wit: SE $\frac{1}{4}$  NW $\frac{1}{4}$ , NE $\frac{1}{4}$  SW $\frac{1}{4}$  and NW $\frac{1}{4}$  SE $\frac{1}{4}$  Section 17, Township 3 North, Range 3 West, B.M.

Witness my hand this 18th day of November, A. D. 1953.

MARK R. KULP  
State Reclamation Engineer

Proof of Completion of Works made November 13, 1953.  
Certificate of Completion of Works issued November 18, 1953.

~~USE THIS SPACE FOR SIGNATURE~~  
Page 6902



09/29/2006

**NOTICE OF ERROR  
REPLY**

RECEIVED  
NOV 09 2006

DEPARTMENT OF  
WATER RESOURCES

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: October 31, 2006**

Water right number: 63-32430

JON M AGEE  
15603 RIVERSIDE RD  
CALDWELL ID 83607  
Telephone Number: (208)454-3960

RECEIVED

NOV 08 2006

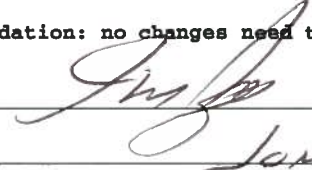
WATER RESOURCES  
WESTERN REGION

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: 10/23/06 SIGNATURE: 

Please print your name: Jon Agee

IDWR Regional Office, 2735 Airport Wy, Boise, ID 83705, 2083342190

rkw