

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: AUG-18-1997
PAGE: A-139

RIGHT NUMBER: 43-10315

NAME & ADDRESS: LAVERE TRACY
VERNON L (BUD) TRACY
149 W 1ST N
MALTA ID 83342

SOURCE: GROUNDWATER

QUANTITY: 0.03 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 04/01/1975

POINT OF DIVERSION: T12S R26E S25 SESENW Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.03 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T12S R26E S25 SENW

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

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
PARCEL NO. RP12S26E252400
STOCKWATER, 100 BEEF

Claim proofread by: KT

Date: 9-5

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: AUG-8-1997
PAGE: A-144

RIGHT NUMBER: 43-10315

NAME & ADDRESS: VERNON L (BUD) TRACY
LAVERE TRACY
149 W 1ST N
MALTA ID 83342

SOURCE: GROUNDWATER

QUANTITY: 0.03 CFS

PRIORITY DATE: 04/01/1975

POINT OF DIVERSION: T12S R26E S25 SESENW Within CASSIA County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER STOCKWATER, 100 BEEF	01-01 12-31	0.03 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T12S R26E S25 SENW

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

PARCEL NO. RP12S26E252400

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim data entry by: KST

Date: 8/13/97

Data entry verified by: THL

Date: 8-15-97

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: A43-10315
Date Received: 6/01/1989
Receipt No: S007451
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: VERNON L. (BUD) TRACY 208-645-2425
Address: 149 W 1ST N
MALTA, ID 83342

AND/OR

Name: LAVERE TRACY 208-645-2425
Address: 149 W 1ST N
MALTA, ID 83342

2. Date of Priority: APR 01, 1975

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
12S	26E	25	SE	SE	NW		CASSIA

5. Description of diverting works:
06"X150'WELL, ELECTRIC PUMP, PIPE, TROUGHS, DEEPENED IN 1980

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.030		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
S/100 BEEF STOCK

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
12S	26E	25	SE NW		STOCK	

11. Place of use in counties: CASSIA

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

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

16. Signature(s)

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

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____

_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

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

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 443-10315

Date Received _____

Receipt Number _____

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day. Filing fee \$25

Please type or print clearly

1. Name of Claimant (s) VERNON L. TRACY DE LAVERE TRACY Phone (208) 645-2425

Mailing Address 149 WEST 1ST NORTH - MALTA, IDAHO Zip 83342

2. Date of Priority (Only one (1) per claim) 4/1/1975

3. Source of water supply (a) GROUNDWATER
which is tributary to (b) _____

4. Location of point of diversion is: Township 12 S. Range 26 E

Section 25, SE 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, B.M.,

County of CASSIA

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well. 6" WELL, 150' DEEP BY MEANS
OF AN ELECTRIC PUMP INTO PIPE LINES AND
TRENCHES, ORIGINALLY DRILLED IN 1975 AND DEEPEMED IN 1980.

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

(Both dates are inclusive) (cfs)
For STOCKWATER purposes from 1-1 to 12-31 amount 0.03

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.03 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of
livestock) 100 HEAD OF BEEF CATTLE, HORSES.

MICROFILMED

MAR 05 1993

10. Place a "D" for domestic and "S" for stockwater use in the corresponding place of use below.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
12S	26E	25								S								

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

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

13. Describe any other water rights used at the same place and for the same purposes as described above.
_____ or None ()

14. Remarks: _____

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice ☐ License ☐ Permit ☐
Decree ☐

If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

16. Signature (s)

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

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

Signature of Claimant (s) Jermund L. (Basil) Swan Date 5-30-89
Sharyl R. Tracy Date 5-30-89

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

of _____, that I have signed the foregoing
Organization

document in the space below as _____ of _____
Title Organization

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

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this 1 day of JUNE 19 89

SEAL

Notary Public Boyd Borch

Residing at Med. Ida.

My Commission Expires 10-15-91

Last Name _____ Ident No. _____ Copies White-Statc, Yellow-Claimant



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Re: A43-00239B
A43-10315 ✓
A43-00240B
A43-10316
A43-02446
A43-02549
A43-10314

July 19, 1989

J.L. Tracy

Malta Id 83342

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim(s) based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim(s) for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

Judy Givens
Office Secretary

/jg

Enclosure(s):

MICROFILMED

MAR 05 1993

