

AJ5856NP

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

DATE: AUG-18-1997
PAGE: A-264

RIGHT NUMBER: 43-10580

NAME & ADDRESS: KENDALL JONES
HC 76
BOX 1120
AMERICAN FALLS ID 83211

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 03/20/1924

POINT OF DIVERSION: T11S R28E S17 SWSE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T11S R28E S17 SWSE

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. 11S28E177200A

Claim proofread by: KT
Date: 9-4

AJ5856NP

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

DATE: AUG-8-1997
PAGE: A-271

RIGHT NUMBER: 43-10580

NAME & ADDRESS: KENDALL JONES
HC 76
BOX 1120
AMERICAN FALLS ID 83211

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 03/20/1924

POINT OF DIVERSION: T11S R28E S17 SWSE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC DOMESTIC, 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T11S R28E S17 SWSE

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

PARCEL NO. 11S28E17720DA

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim data entry by: KSJ
Date: 8/14/97
Data entry verified by: [Signature]
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: A43-10580
Date Received: 7/18/1989
Receipt No: S008582
Received By: lu

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: KENDALL JONES
Address: HC 76
BOX 1120
AMERICAN FALLS, ID 83211
208-349-5710

2. Date of Priority: MAR 20, 1924

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	28E	17	SW	SE			CASSIA

5. Description of diverting works:
6"X175' WELL

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	28E	17	SW	SE		DOMEST	

11. Place of use in counties: CASSIA

A43-10580

Page 1

Date: 07/18/89

MICROFILMED

MAR 6 5 1993

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 FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 443-10580

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) KENDALL Jones Phone (208) 349-5710Mailing Address HC. 76 Box 1120 American Falls, Id Zip 832112. Date of Priority (Only one per claim) 3/20/1924 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) Domestic

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 11 Range R 28Section 17, SW 1/4 of SE 1/4 of _____ 1/4, Govt. Lot _____, BM.,County of CassiaAdditional points of diversion if any: none5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. Well is 6" pipe 175 ft depth

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

For Domestic purposes from 1-1 Month/Day to 12-31 Month/Day amount 0.04 (cfs)

(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership, Stockwater: Type and Number of livestock) Domestic - 1

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MAR 15 1989

RECEIVED

JUN 7 1989

Department of Water Resources
Southern Region Office

RECEIVED

JUL 17 1989

Department of Water Resources
Southern Region Office

9. Place of use is: Township: T 11 Range R 28 E
Section 17, SE 1/4 of _____ 1/4, Govt. Lot _____, B.M.,
County of Cassia for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any none
11. In which county (ies) are lands listed above as place of use located? Same - 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. None (☒)

14. Remarks: None

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

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

Number of Attachments 2

By signing I/We acknowledge reading the notice on the back of this claim form. I/We wish to receive for a small annual fee monthly copies of the docket sheet.
YES _____ NO ☒

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

Signature of Claimant (s) *Russell Jones* Date 7-6-89
_____ Date _____

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

of _____, that I have signed the foregoing
Organization _____
document in the space below as SE of _____
Title _____ Organization _____

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

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

Subscribed and sworn (or affirmed) before me this 6th day of June 19 89

SEAL

Notary Public Mary L. Burchiel

Residing at Burley, Idaho

My Commission Expires 5-25-95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 6 5 1993



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

June 23, 1989

Jones Farms
Kendall Jones
HC 76 Box 1120
American Falls, ID 83211

Claim #1 of 3

RE: SRBA Claim

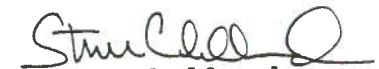
Dear Claimant:

Please find enclosed your claim and your check # 5043 for \$ 75.00 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

- () Item #2 - Priority date (day/month/year)
 - (☒) Item #4 Point of Diversion Legal Description
 - () Item #6 Uses descriptions
 - () Item #9 Description of Non-irrigation uses
 - (☒) Item #10 Place of Use Legal Description
 - (☒) Item #16 Signature & Notarization *complete signature Block for Org.*
 - () Improper fee (THE CORRECT FEE IS \$ _____)
 - () Other or Remarks
- Needs 1/4-1/4 Descriptions*

If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed and additional late fee of \$ 50.00.

Sincerely,


Steve Clelland
Water Right's Agent

enc:

MICROFILMED

MAR 05 1990



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

Aug. 29, 1989

Re: A43-10580
A43-10581
A43-10582

MERLIN H JONES PARTNERSHIP
HC 76
BOX 1120
AMERICAN FALLS ID 83211

Dear Claimant(s):

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

Please review the computer generated claim 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
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 6 5 1993



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

June 23, 1989

Jones Farms
HC 76 Box 1120
American Falls, ID 83211

Claim #3 of 3

A43-10581

10580

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 5043 for \$ 75.00 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

- () Item #2 Priority date (day/month/year)
- (✓) Item #4 Point of Diversion Legal Description
- () Item #6 Uses descriptions
- () Item #9 Description of Non-irrigation uses
- (✓) Item #10 Place of Use Legal Description
- () Item #16 Signature & Notarization
- () Improper fee (THE CORRECT FEE IS \$ _____)
- () Other or Remarks

Needs 1/4-1/4
Descriptions

If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional late fee of \$ 50.00.

Sincerely,

Steve Clelland
Water Right's Agent

enc:

PREFIX TRANSLATION: ADJUDICATION CLAIM

[illegible]

COURT REPORT FILING	-	00/00/0000
OBJECTION FILED DATE	-	00/00/0000
RESPONSE FILED DATE	-	00/00/0000
CLAIM RECEIVED DATE	-	07/18/1989
PROOF DUE DATE	-	00/00/0000
LICENSED DATE	-	00/00/0000

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FIELD INSPECTION MADE
FIELD INSPECTION FLAG
VERIFIED DATE
LAST AMENDED DATE
PROOF MADE DATE
RECEIPT NUMBER
PGU OWNERSHIP FLAG
NAME CONNECTOR

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 - 00/00/0000
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 - 00/00/0000
 - 00/00/0000
 - 5008532
 - Y

CIVIL CASE NUMBER	-	39576
OLD CASE NUMBER	-	
OLD JUDICIAL DISTRICT	-	
TEMPORARY RIGHT	-	P
WATER DISTRICT	-	
FEDERAL/STATE INDICATOR	-	S
PRESUMPTION FLAG	-	

PROOF
AUG 4 1991

CERTIFIED
SEP 11 1991
WATER EXAMINER

DATA ENTRY

ENTERED

CHECKED.

Certified By
 Topo Map/Ortho-PQ
 ASCS Map
 Watermaster Records
 NAPP Photos
 Field Exam
 Other (See Remarks)
 County Records
 Witness Statement
 Project Records
 IDWR Records