



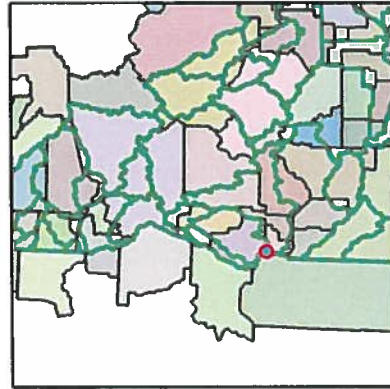
Idaho Department of Water Resources

SRBA Recommendation:

3-10244

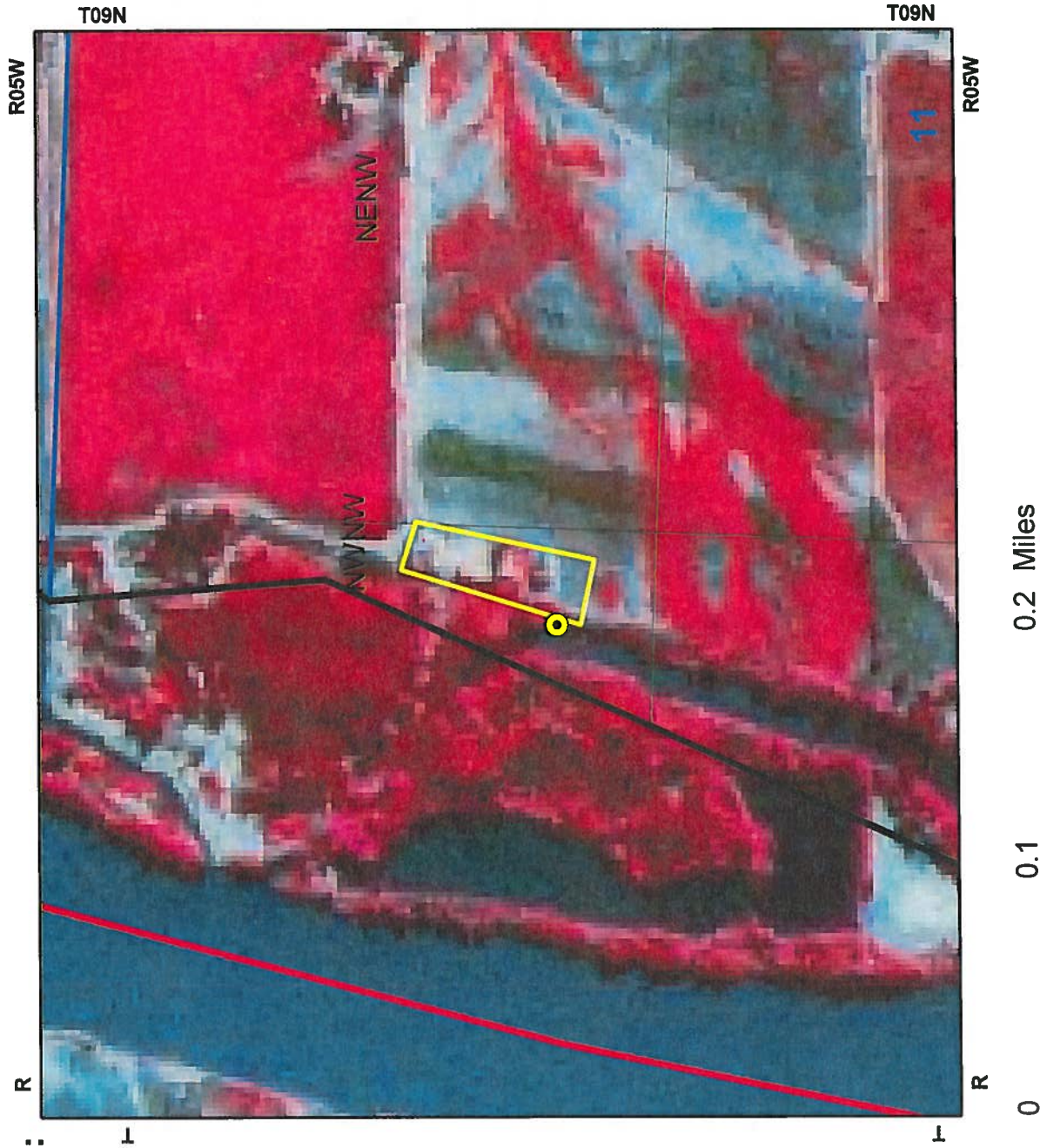
Legend

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



Payette County
IDWR Basin 3

Prepared by J. Dean
On Thursday, August 10, 2006
1987/88 Aerial Photography



08/10/2006

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

RIGHT NUMBER: 3-10244

NAME AND ADDRESS: BETTY ATTEBERY BELL
11773 N RIVER RD
PAYETTE ID 83661

SOURCE: SNAKE RIVER

TRIBUTARY: COLUMBIA RIVER

QUANTITY: 0.020 CFS

PRIORITY DATE: 11/01/1946

POINT OF DIVERSION:

T09N R05W S11 SENWNW Lot 1 Within PAYETTE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

IRRIGATION

03/01 11/15

0.020 CFS

PLACE OF USE: IRRIGATION Within PAYETTE County

T09N R05W S11 Lot 1 NWNW 1.00

1 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 - Beneficial Use

Right 67-4324A is a split from former right 67-4324.

This right is renumbered from former right 67-4324A.

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

Contacts Data Entry Form

Claim Number: 3-10244

Owner Type	Full Name	Address	City	State	Zip	Phone
Original Owner	RUTH M THOMPSON	11775 N RIVER RD	PAYETTE	ID	83661	(208)642-9760
Original Owner	M EARL ATTEBERY	11773 N RIVER RD	PAYETTE	ID	83661	(208)642-9760
Current Owner	BETTY ATTEBERY BELL	11773 N RIVER RD	PAYETTE	ID	83661	(208) 642-9760

Date of Field Exam: 7/27/06 Time: 11:00amAccompanied By: Dwane Walden Phone Number: 642-6147Relationship to Claimant: Neighbor

Directions to Property (if different from above) and/or update owner information:

* We were examining the other portion of this split, which allowed us to get a better feel for how this water right is used. Because it is such a small right no measurements or GPS information was obtained.

Reviewer: JLDDate: 8/9/06

Priority Date Data Entry Form

Claim Number 3-10244

Claimed Priority Date: 11/1/1946

Claimed Basis: Beneficial Use

☒ Use Claimed Priority Date and Basis as Recommended Priority Date and Basis

Water Right Priority Date:

Water Right Basis:

Recommended Priority Date ____

Recommended Basis _____

Document the evidence submitted/reviewed for the priority date claimed, include your analysis of the evidence:

Affidavit of Betty Atterbery Bell describes personal
knowledge of irrigation back to 1946.

Reviewer: JLDDate: 8/9/06

Point of Diversion and Source Data Entry Form

Claim Number 3-10244

Claimed Point of Diversion and Source

T09N R05W S11 SENWNW Lot 1 Within PAYETTE County Source: UNNAMED SLOUGH SNAKE RIVER

☐ Use Claimed POD and Source as Recommended POD and Source

Water Right Point of Diversion and Source

Recommended Point of Diversion and Source

Source Information

Source

Snake River

Tributary To

Columbia River

Twp	Rge	Sec	Gov Lot	QQQ of QQ of Q	County	Source
9N	5W	11	1	SE NW NW	Payette	Snake River

Other rights from this POD? _____

Document how the POD and Source were verified:

Claim, aerial photo, field exam

Reviewer: JLDDate: 8/9/06

Place Of Use Data Entry Form

Claim Number 3-10244

Claimed Place Of Use

T09N R05W S11 Lot 1 NWNW 1.00

Total Acres 1

☒ Use Claimed POU as Recommended POU

Water Right Place Of Use

Recommended Place of Use

_____ See corrections to claimed POU above

Tw	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use

Total Acres _____

Document how the POU was verified:

aerial photographyReviewer: JLDDate: 8/9/06

Purpose of Use Data Entry Form

Claim Number 3-10244

Claimed Purpose of Use

Water Use

Number of Homes

Number of Stock

Acre Limit

IRRIGATION

☐ Use Claimed Purpose of Use as Recommended Purpose of Use

Water Right Purpose of Use

Water Use

Number of Homes

Number of Stock

Acre Limit

Recommended Purpose of Use

Water Use

Number of Homes

Number of Stock

Acre Limit

Number of Other

Irrigation				

Document how the Purpose of Use was verified:

aerial photography : field exam

Reviewer: JLDDate: 8/9/06

Period of Use and Quantity Data Entry Form

Claim Number 3-10244

Claimed Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
IRRIGATION	3/15	11/15	0.02	

Overall Diversion Rate 0.02

Overall Diversion Volume

☐ Use Claimed Period of Use and Quantity as Recommended Period of Use and Quantity

Water Right Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
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Overall Diversion Rate

Overall Diversion Volume

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
Irrigation	3/1	11/15	.02	X

Overall Diversion Rate .02

Overall Diversion Volume

Document how the Period of Use and/or Diversion Rate were verified:

Period of Use - recommended based on standard.
Quantity - no measurement required for 1" / acre.

Reviewer: JLD

Date: 8/9/06

Idaho Department of Water Resources

2004 Imagery



67-43242 ^b Duayne Waldener - bought from Betty Atteberry



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 3-10244
Date Received: 4/12/1990
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

BETTY ATTEBERY BELL Phone: (208) 642-9760

11773 N RIVER RD
PAYETTE ID USA 83661

2. Date of Priority: 11/01/1946

3. Source: UNNAMED SLOUGH Trib. to: SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot				County	Type
09N	05W	11	SE	NW	NW	1	PAYETTE	

5. Description of diverting works:

1 HP MOTOR WITH SPRINKLERS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	3/15	11/15	0.02	

7. Total Quantity Appropriated is:
0.02 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	
09N	05W	11	NW	NW	1	IRRIGATION	1
Section Acres							1
Total Acres							1

11. Place of use in counties: PAYETTE

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

13. Other Water Rights Used:

14. Remarks:

Ownership changed by DB 5/14/2002

This right was renumbered to right 3-10244.

This right is renumbered from former right 67-4324B.

SPLIT RIGHT

15. Basis of Claim: Beneficial Use

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN 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 67-4324B
Date Received: 4/12/1990
Receipt No: M006616
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

BETTY ATTEBERY BELL
11773 N RIVER RD
PAYETTE ID USA 83661

Phone: (208)642-9760

2. Date of Priority: 11/01/1946

3. Source: UNNAMED SLOUGH Trib. to: SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot			County	Type
09N	05W	11	SE	NW	NW	1	PAYETTE

not on license

5. Description of diverting works:

1 HP MOTOR WITH SPRINKLERS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
IRRIGATION	3/15	11/15	0.02	

no fee needed

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

SCANNED
APR 14 2004

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
09N	05W	11	NW	NW	1	IRRIGATION
						1
Section Acres						1
Total Acres						1

-3 Acres

11. Place of use in counties: PAYETTE

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

13. Other Water Rights Used:

14. Remarks:

Ownership changed by DB 5/14/2002

SPLIT RIGHT

15. Basis of Claim: Beneficial Use

RECEIVED
MAY 13 2002
WATER RESOURCES
WESTERN REGION

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

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided, if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
67-43243	NO FEE				
67-11461	reissued				

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts. *Fee based on Glen's memo for ownership change.*
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) are for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s) MEarl Attebury
11773 N. River Rd Payette, ID 83661
4. New Owner/Claimant(s) Betty Attebury Bell
Name Connector (Check one): ☒ and, ☐ or, ☐ and/or
- New Mailing Address Same address
- City, State and ZIP Code _____
- New Telephone Number (208) 642-9760
5. Date you acquired the property _____

6. **If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7.** If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

7.

Signature of New Owner(s) or Claimant(s)
(include title if applicable)

Betty Attchery Bell

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only

Received by DB Date 5/13/02 Fee N/A
 Received by _____ Date _____ Receipt No. _____
 Processed by _____ AJ Date _____ WR _____ Date _____

000170
I.D. TAG NO.
92-201
Local File Number

HEALTH DIVISION
CENTER FOR HEALTH STATISTICS 136-
CERTIFICATE OF DEATH

State File Number

1. DECEDENT'S NAME First Middle Last Marshall Earl ATTEBERY			2. SEX Male	3. DATE OF DEATH (Month, Day, Year) Oct. 10, 1992
4. SOCIAL SECURITY NUMBER 519 20 6968		5a. AGE Last Birthday (Years) 67	5b. Under 1 Year Mos. Days Hours Mins.	5c. Under 1 Day Hours Mins.
6. BIRTHPLACE (City and State or Foreign Country) Weiser, Idaho			7. DATE OF BIRTH (Month, Day, Year) November 15, 1924	
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? ☒ Yes ☐ No				
9a. PLACE OF DEATH (Check only one) ☒ HOSPITAL ☐ Inpatient ☐ ER/Outpatient ☐ DOA ☐ OTHER ☐ Nursing Home ☐ Decedent's Home ☐ Other (Specify)				
9b. FACILITY NAME (If not institution, give street and number) Holy Rosary Med. Center 351 S.W. 9th St.			9c. CITY, TOWN, OR LOCATION OF DEATH Ontario	
9d. COUNTY OF DEATH Malheur				
10a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) Service Representative		10b. KIND OF BUSINESS/INDUSTRY Commercial Refrigeration		11. MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Married
12. SPOUSE (If Married, Widowed) Betty Gene Thompson				
13a. RESIDENCE - STATE Idaho		13b. COUNTY Payette		13c. CITY, TOWN OR LOCATION Payette
13d. STREET AND NUMBER 11773 N. River Road				
13e. INSIDE CITY LIMITS? ☐ Yes ☒ No		13f. ZIP CODE 83661		14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.) ☒ No ☐ Yes Specify:
15. RACE American Indian, Black, White, etc. (Specify) White		16. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (9-12) College (1-4 or 5+) 12		
17. FATHER - NAME first middle last Henry Attebery			18. MOTHER - NAME first middle maiden Maude Brown	
19. INFORMANT - NAME and relationship to deceased Betty Attebery Wife				
20a. METHOD OF DISPOSITION ☐ Mausoleum ☒ Burial ☐ Cremation ☐ Removal from State ☐ Donation ☐ Other (Specify)		20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Hillcrest Cemetery		20c. LOCATION - City or Town, State Weiser, Idaho
21a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <i>Barbara J. Olson</i>		21b. LICENSE NUMBER (Of Licensee) M632		22. NAME, ADDRESS AND ZIP OF FACILITY Thomason Funeral Home 221 E. Court Weiser, Idaho 83672
23. DATE FILED (Month, Day, Year) October 22, 1992		24. REGISTRAR'S SIGNATURE <i>Barbara J. Olson</i>		
25. DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT? ☒ YES ☐ NO ☐ N/A		26. WAS GIFT MADE? ☒ YES ☐ NO ☐ N/A		
TO BE COMPLETED BY CERTIFYING PHYSICIAN				
27. TIME OF DEATH 10:45 P M		28. WAS MEDICAL EXAMINER NOTIFIED? ☐ Yes ☒ No		
29. To the best of my knowledge, death occurred at the time, date, place and due to the cause(s) and manner stated. (Signature) <i>R. Carroll</i>				
30. DATE SIGNED (Month, Day, Year) 10-20-92				
31. NAME, TITLE, ADDRESS AND ZIP OF CERTIFYING MEDICAL EXAMINER (Type or Print) Ronald Carroll MD 823 Center Ave Payette, Idaho 83661				
32. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)				
33. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c). Do not enter mode of dying, e.g. Cardiac or Respiratory Arrest.)				
PART I (a) PNEUMONIA		Interval between onset and death 1-2 wks		
(b) Multiple CVA's		Interval between onset and death		
(c)		Interval between onset and death		
PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not resulting in the underlying cause given in PART I. Gastroenteric Feeding tube Present				
37. Did tobacco use contribute to the death? ☐ Yes ☐ Probably ☒ No ☐ Unknown		38. AUTOPSY ☐ Yes ☒ No		39. If YES were findings considered in determining cause of death? ☐ Yes ☐ No ☐ N/A
40. MANNER OF DEATH ☒ Natural ☐ Pending Investigation ☐ Accident ☐ Undetermined Manner ☐ Suicide ☐ Homicide ☐ Legal Intervention		41a. DATE OF INJURY (Month, Day, Year)		41b. TIME OF INJURY M ☐ Yes ☐ No
41c. INJURY AT WORK? ☐ Yes ☐ No		41d. DESCRIBE HOW INJURY OCCURRED		
41e. PLACE OF INJURY - At home, farm, street, factory, office building etc. (Specify)		41f. LOCATION (Street and Number or Rural Route Number; City or Town, State)		

RESERVED FOR REGISTRAR'S USE

ORIGINAL - VITAL STATISTICS COPY

45-2 Rev 7/91

DATE ISSUED

October 22, 1992

STATE OF OREGON, COUNTY OF MALHEUR) ss

HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE AS THE SAME APPEARS ON FILE IN THE VITAL STATISTICS SECTION OF THE OREGON STATE HEALTH DIVISION.

COUNTY REGISTRAR

Barbara J. Olson

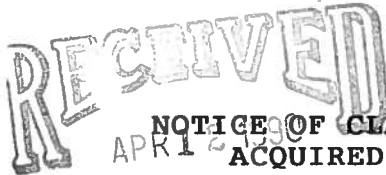
NOT VALID WITHOUT RAISED SEAL OF MALHEUR COUNTY HEALTH DEPARTMENT

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: A67-04324B
Date Received: 4/10/1990 4-12-
Receipt No: MO86616
Received By: [Signature]



NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: Department of Water Resources 208-642-9760
Address: LATTEBERY
11773 N. RIVER RD.
PAYETTE, ID 83661

2. Date of Priority: NOV 01, 1946

3. Source: UNNAMED SLOUGH Trib. to: SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
09N	05W	11	SE	NW	NW	1	PAYETTE

5. Description of diverting works:
1 HP MOTOR WITH SPRINKLERS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/15	11/15	0.020		

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

8. Total consumptive use is 3.5 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
09N	05W	11	NW	NW	1	IRR	1.0
Section Acres							1.0

MICROFILMED
OCT 02 1992

10. Place of Use: Continued

Total Acres 1.0

11. Place of use in counties: PAYETTE

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

13. Other Water Rights Used:
NONE

14. Remarks:
SPLIT RIGHT

15. Basis of Claim: BENEFICIAL USE

MICROFILMED
OCT 02 1992

16. Signature(s)

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

Number of attachments: 1

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): M. Earl Attebery Date: 4-12-90
Betty L. Attebery Date: 4-12-90

State of Idaho)
Oregon) SS.
County of Malheur)

Subscribed and sworn (or affirmed) before me this 12th day
of April 19 90

Annette Evans
Notary Public

Seal

Residing at Ontario, Or.
My Commission Expires 9-14-90



300 000 Feet High

MICROFILME
OCT 02 1992



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way, Boise, Idaho 83705-5082 - (208) 334-2190

FAX (208) 334-2348

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

May 14, 2002

BETTY ATTEBERY BELL
11773 N RIVER RD
PAYETTE ID 83661

Re: Notice of Claim to a Water Right No. 67-4324B

Dear Claimant(s):

Enclosed is a copy of the above referenced claim, which reflects the change in ownership of the land and appurtenant water rights covered under the original filing.

The Department will contact you in the future concerning any requirements that may be needed in order to process this claim for final court decree.

Please note this information has also been forwarded to our State Office to complete the change for water right number 67-11461, as it has been decreed by the SRBA Court.

Thank you for your patience and cooperation, as we have had several water right changes to process. If you have any questions concerning the enclosed claim, please feel free to contact this office.

Sincerely,

A handwritten signature in cursive script that reads "Denise Buffington".

Denise Buffington
Office Specialist 1
Adjudication Section
Western Region Office

DB: db

Enclosure

SCANNED
APR 14 2004