

509-2515

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

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

CIVIL CASE NUMBER: 39576

Ident. Number: A35-07022

Date Received:

Receipt No: COD 6236

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

CH 1-20-87

APR 07 1989

Department of Water Resources

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name: CHURCH OF JESUS CHRIST LATTER DAY SAINTS 801-240-2929  
Address: REAL ESTATE DIVISION  
TWELFTH FLOOR  
50 EAST NORTH TEMPLE STREET  
SALT LAKE CITY, UT 84150

2. Date of Priority: MAY 09, 1968

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County  |
|----------|-------|---------|--------|--------|-----|-----|---------|
| 05S      | 31E   | 21      | SE     | SE     | SE  |     | BINGHAM |

5. Description of diverting works:

6. Water is used for the following purposes:

| Purpose    | From  | To    | C.F.S. | (or) | A.F.A. |
|------------|-------|-------|--------|------|--------|
| IRRIGATION | 04/15 | 10/31 | 0.780  | ✓    |        |

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

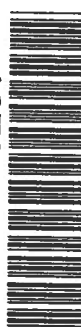
| Township      | Range | Section | 1/4 of | 1/4 | Lot | Use | Acres |
|---------------|-------|---------|--------|-----|-----|-----|-------|
| 05S           | 31E   | 21      | SE     | SE  |     | IRR | 39.0  |
| Section Acres |       |         |        |     |     |     | 39.0  |

A35-07022

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Date: 01/13/89

A3507022



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10. Place of Use: Continued

Total Acres 39.0

11. Place of use in counties: BINGHAM

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: LICENSE

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do \_\_\_\_\_ do not \_\_\_\_\_ 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 \_\_\_\_\_ AUTHORIZED AGENT \_\_\_\_\_ of  
Corporation of the Presiding Bishop of the Church of  
Jesus Christ of Latter-day Saints, a Utah Corporation sole Title

\_\_\_\_\_, that I have signed the foregoing  
Organization  
document in the space below as \_\_\_\_\_ AUTHORIZED AGENT \_\_\_\_\_ of

Corporation of the Presiding Bishop of the Church of  
Jesus Christ of Latter-day Saints, a Utah Corporation sole Title  
\_\_\_\_\_, and that the statements contained in the

Organization  
foregoing document are true and correct.

BY: Frederick A. Baker 2  
Signature of Authorized Agent  
Corporation of the Presiding Bishop of the Church of  
Jesus Christ of Latter-day Saints, a Utah Corporation sole AUTHORIZED AGENT

\_\_\_\_\_  
Title and Organization

April 3, 1989  
Date

State of ~~Idaho~~ Utah )  
County of Salt Lake ) SS.

Subscribed and sworn (or affirmed) before me this 3 day

of April 19 89

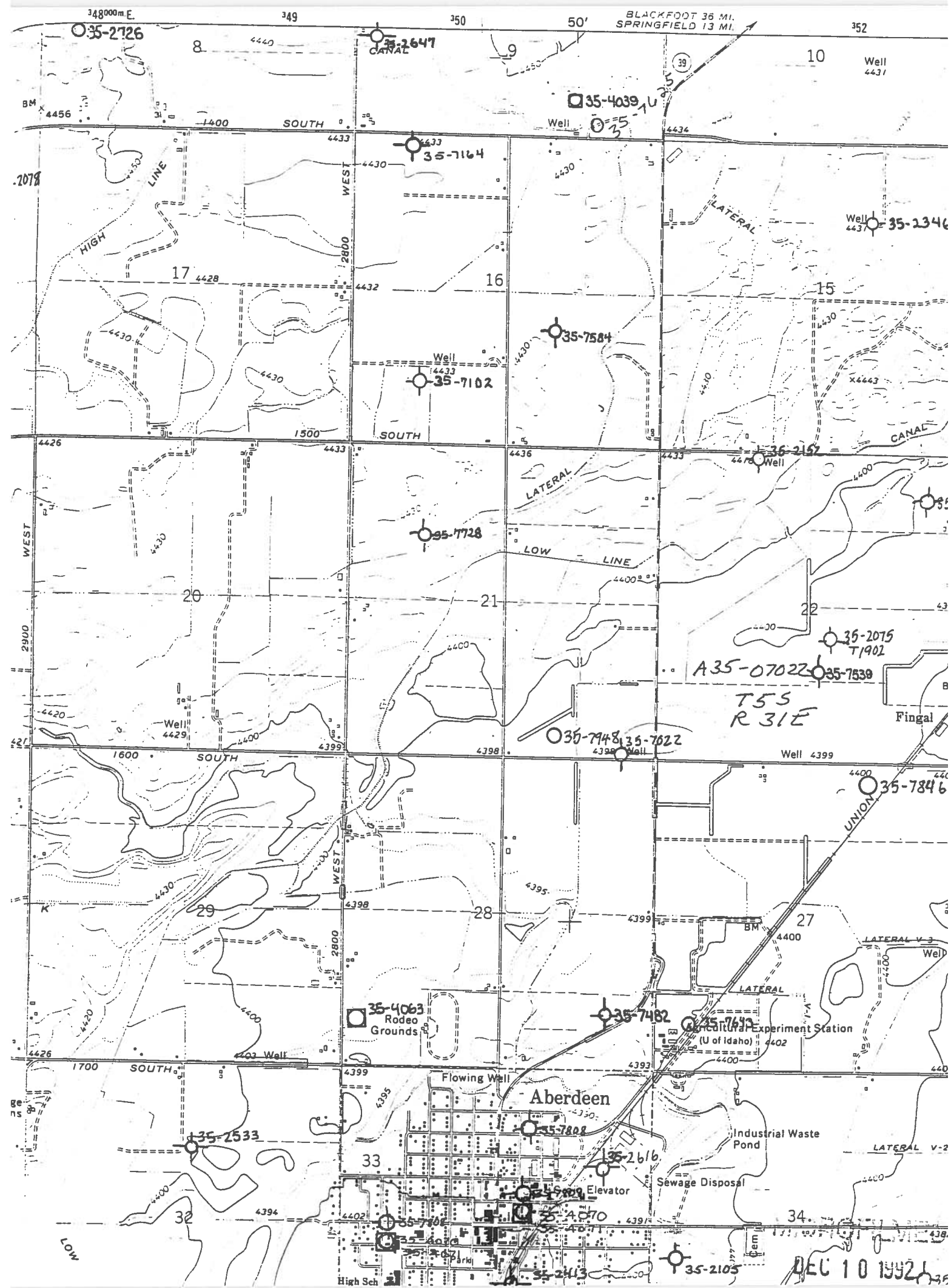
Rita C. Jensen  
Notary Public

Seal



Residing at Salt Lake City

My Commission Expires 6/17 1992



W.D. A. Anderson  
66.7 Ac



ADJUDICATION FILING FEES FOR IDAHO

Department of Water Resources

PROPERTY IDENTIFICATION

Idaho State Water Right Permit # A35-07022  
LDS Church Property # 5092515

FEE CALCULATIONS

Domestic, stockwatering, fire protection, etc. \$ \_\_\_\_\_  
Flat fee for irrigation. . . . . \$ 50.00

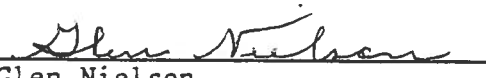
VARIABLE FEE SCHEDULE

Irrigation (\$1.00 per acre). . . . . \$ 39.00  
Power Generation (\$3.00 per kilowatt) . . . . \$ \_\_\_\_\_  
Aquaculture (\$10.00 per cfs) . . . . . \$ \_\_\_\_\_  
All other uses (\$100.00 per cfs) . . . . . \$ \_\_\_\_\_  
Other charges. . . . . \$ \_\_\_\_\_

TOTAL \$ 59.00

DATE 1-20-89

  
Carter Fritschle  
Idaho Dept. of Water Resources

  
Glen Nielson  
Field Representative  
Church of Jesus Christ  
of Latter-day Saints

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4/5/1989

## SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME LDS Church CLAIM IDENT. NO. A35-070

DATE RECEIVED \_\_\_\_\_ CK # \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

- |                                                                                                                                                                                                                                      | YES                                 | NO                       | Require Info |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------|
| 1. Is the name and address complete with zip code? . . . . .                                                                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 2. Is a priority date entered?<br>Is the priority date acceptable in view of mandatory filing dates?<br>See Adjudication Memos #1 and #4 to determine if a Permit is required.                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 3. (a) Is a source entered? . . . . .                                                                                                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| (b) Is a tributary to entered? (if required) . . . . . N/A                                                                                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 4. Is the legal description of the p.d. sufficient? . . . . .                                                                                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 5. Is there a description of the diverting works? . . . . .                                                                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. . . . .                  | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| Is the period of use included? . . . . .                                                                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| Is a quantity claimed for each use? . . . . .                                                                                                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 7. Is a total quantity claimed entered? . . . . .                                                                                                                                                                                    | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 8. If required is a consumptive use entered? . . . . . N/A                                                                                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| Is the consumptive use correct? . . . . . N/A                                                                                                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. . . . . N/A | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 10. Is (are) the place(s) of use and purpose(s) indicated? . . . . .                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | *            |
| 11. Is (are) the county(ies) entered? . . . . .                                                                                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 12. Is the ownership of p.u. checked? . . . . .                                                                                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 13. Are other water rights listed or "none" indicated? . . . . .                                                                                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) . . . . . N/A                                                                | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 15. Is the basis of the claim indicated? . . . . .                                                                                                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) . . . . . N/A                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> |              |
| 17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. . . . .                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | *            |
| 18. Has the claim been signed, sealed, and dated by a notary? . . . . .                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | *            |
| 19. Was this claim filed on time, or was an extension granted? . . . . .                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | *            |
| 20. Is the fee enclosed correct? . . . . . Exempt                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | *            |
| 21. If this claim is based on an existing water right, has the identification number been entered? . . . . . N/A                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |              |
| 22. Should this claim be data entered? . . . . .                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |              |

Claim checked by: CA Date: 6-5-89Claim must be returned to claimant:      (Yes)      (No)Claimant must be notified of modifications:      (Yes)      (No)Receipt Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_  
Claim data entered by: \_\_\_\_\_ Date: \_\_\_\_\_  
Sent to claimant by: \_\_\_\_\_ Date: \_\_\_\_\_  
Checked by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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IDAHO DEPARTMENT OF WATER RESOURCES

**CHURCH OF LATTER DAY SAINTS**

**Water Right No(s).**

**35-07022**



0 1320 Feet



Point of Diversion  
Location



Place of Use  
Boundary

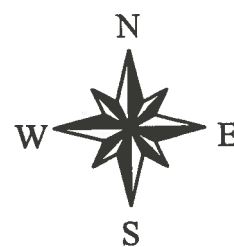


Section Lines



Quarter/Quarter Lines

**Township(s) 05S, Range(s) 31E**  
**Section(s) 21**



GIS Place of Use Illustration  
1987/1988 NAPP Photograph  
Prepared by: Greg Taylor  
Date: Sept. 24, 1998

Old (D) Number -

```

+ - - - - Address - - - - - +

```

1 - REAL ESTATE DIVISION  
2 - TWELFTH FLOOR  
3 - 50 EAST NORTH TEMPLE STREET  
City- SALT LAKE CITY State- UT Zip- 84150  
Phone - 801-240-2929

1 - ABERDEEN 2ND WARD  
2 -  
3 -  
City- ABERDEEN  
Phone - 208-000-0000  
State- ID Zip- 83210

```
+ - - - Status - - - +
```

Tributary " " " " " " " " " " " "

----- Point of Diversion -----  
County  
(11) BINGHAM

| Code            | Description | Period From              | Water Use<br>Period To | Diversion Rate | Diversion Volume |
|-----------------|-------------|--------------------------|------------------------|----------------|------------------|
| 01 - IRRIGATION |             | <del>2/1/04</del> 2/1/15 | 10/31                  | 0.780          | 156.00           |

|                           |     |              |     |
|---------------------------|-----|--------------|-----|
| + - Total Consumptive Use | - + | + - KW Usage | - + |
| <del>117.8</del>          |     |              |     |

| +   | Twn | Rng | Sec   | Tract | lot | Acres | Code | Description | County       |
|-----|-----|-----|-------|-------|-----|-------|------|-------------|--------------|
| 05S | 31E | 21  | SE SE |       |     | 39.0  | 01   | IRRIGATION  | (11) BINGHAM |

**Total Acres: 39.0**

+ - - - Diversion Means - WELL/PUMP TO SPRINKLERS

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use - ABERDEEN SPRFLD CANAL

[illegible]

Water right number - R35-07022

Prefix Translation: RESEARCH

+ - - - - - Old Water Right Numbers - - - - - +

+ - - - - - Old Water Right Numbers - - - - - +  
No Old Water Right Numbers Found+ - - - - - Conditions of Approval - - - - - +  
E02 - USE OF THIS RIGHT IS COMBINED WITH WATER FROM  
- ABERDEEN SPRINGFIELD CANAL CO.+ - - - - - Decree Plaintiff - - - + + - - - - - Decree Defendant - - - + +  
Decree Date - - +  
00/00/0000+ - - - - - Comments - - - - - +  
No Comments Found+ - - - - - Audit Fields - - - +  
11/06/92 DCARLSON

+ - - - - - Adjudication Rights Dates and Flags Area - - - - - +

|                      |              |                       |              |                       |         |
|----------------------|--------------|-----------------------|--------------|-----------------------|---------|
| Court Report Filing  | - 00/00/0000 | Field Inspection Made | - 11/06/1992 | Civil Case Number     | - 39576 |
| Objection Filed Date | - 00/00/0000 | Field Inspection Flag | -            | Old Case Number       | -       |
| Response Filed Date  | - 00/00/0000 | Verified Date         | - 11/06/1992 | Old Judicial District | -       |
| Claim Received Date  | - 04/07/1989 | Last Amended Date     | - 00/00/0000 | Temporary Right       | - P     |

|                    |           |                         |     |
|--------------------|-----------|-------------------------|-----|
| POU Ownership Flag | - Y       | Water District          | -   |
| Receipt Number     | - C006236 | Federal/State Indicator | - S |
| Name Connector     | - OR      | Presumption Flag        | -   |
|                    |           | Notice of Error Flag    | -   |

PAGE: 1  
GENERAL INFORMATION

CLAIM NUMBER: A35-07022

LAST: CHURCH OF JESUS CHRIST LATTER DAY SAINTS FIRST:  
ADDRESS: ABERDEEN 2ND WARD  
CITY: ABERDEEN STATE: ID ZIP: 83210  
PHONE NUMBER: 208-000-0000

OWNER CODE: 3

LAST: CHURCH OF JESUS CHRIST LATTER DAY SAINTS FIRST:  
ADDRESS: REAL ESTATE DIVISION  
FELTBY FLOOR  
CITY: 30 EAST NORTH TEMPLE STREET  
SALT LAKE CITY STATE: UT ZIP: 84150  
PHONE NUMBER: 801-240-2929

OWNER CODE: C

FIELD EXAM REQUIRED?  
VERIFICATION REQUIRED DUE TO REMARKS? DATAGAS: FIELD  
N EXAMINER

NO REMARKS IN CLAIM

CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_) \_\_\_\_-\_\_\_\_

DATE OF FIELD EXAM: 11/6/92

APPOINTMENT MADE: Y(\_\_\_\_) V(\_\_\_\_)

TIME: \_\_\_\_:\_\_\_\_ A(\_\_\_\_) P(\_\_\_\_)

ACCOMPANIED BY: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_) \_\_\_\_-\_\_\_\_

RELATIONSHIP TO CLAIMANT: \_\_\_\_\_

DIRECTIONS TO PROPERTY / REMARKS: \_\_\_\_\_

Office Review

A. AD CLAIM: # A35-07022 PRIORITY DATE: 05-09-1958 STAGE: 1  
 B. WR RECORD: # 35-07022 PRIORITY DATE: 05-09-1958 STAGE: 1

C. FIELD EXAM REQUIRED? ☐ DATABASE ☒ FIELD EXAMINER  
 DUE TO PRIORITY DATE DISCREPANCY? (Y/N) N

ARE THERE OBVIOUS REASONS TO QUESTION THE PRIORITY DATE CLAIMED? Y( ) N(X)

REMARKS:

RECOMMENDED PRIORITY DATE:

05-09-1958

REVIEWED BY

*[Signature]*

DATE

11/10/92

A. AJ CLAIM POINT OF DIVERSION AND SOURCE:

| RIGHT     | TRP. | REG. | SEC. | 1/4 | 1/4 | 1/4 | LOT | CNTY    |
|-----------|------|------|------|-----|-----|-----|-----|---------|
| 435-07022 | 055  | 51E  | 21   | 3E  | SE  | SE  |     | BINGHAM |

OTHER AJ CLAIMS WITH SAME AJ POD  
 1 PREFIX R PREFIX  
 NONE NONE

HR RECORDS IN SAME 40 ACRE TRACT  
 NONE

SOURCE: GROUNDWATER

TRIB:

B. HR POINT OF DIVERSION AND SOURCE:

| RIGHT    | TRP. | REG. | SEC. | 1/4 | 1/4 | 1/4 | LOT | CNTY    |
|----------|------|------|------|-----|-----|-----|-----|---------|
| 25-07022 | 055  | 51E  | 21   |     | SE  | SE  |     | BINGHAM |

OTHER HR RECORDS WITH SAME HR POD  
 AJ CLAIMS IN SAME 40 ACRE TRACT  
 1 PREFIX R PREFIX  
 NONE NONE

SOURCE: GROUNDWATER

TRIB:

C. FIELD EXAM REQUIRED?

| DUE TO POD DISCREPANCY? (Y/N) | DUE TO SOURCE DISCREPANCY? (Y/N) | DATABASE | FIELD EXAMINER |
|-------------------------------|----------------------------------|----------|----------------|
| Y                             | N                                |          |                |

REMARKS:

Pod is ok

RECOMMENDED POINT(S) OF DIVERSION AND SOURCE: 1/4 1/4 LOT COUNTY

SOURCE: GROUNDWATER TRIG:

REVIEWED BY: DC DATE: 11/6/92



A. AD CLAIMED USES:

PURPOSES  
A35-07022 IRRIGATION

FROM 04-15 TO 10-31

TOTAL DIVERSION RATE/VOLUME CLAIMED

180 CFS  
DIVERSION QUANTITY

9. WR RECORDED USES:

PURPOSES  
35-07022 IRRIGATION

FROM 04-15 TO 10-31

TOTAL DIVERSION RATE/VOLUME CLAIMED

180 CFS  
DIVERSION QUANTITY  
180 CFS 136.50 AF/A  
180 CFS 136.50 AF/A

PRESUMPTION FLAG:

C. FIELD EXAM REQUIRED?

DUE TO WATER-USE DISCREPANCY? (Y/N)  
DUE TO DIVERSION RATE DISCREPANCY? (Y/N)  
DUE TO PERIOD FROM/TO DISCREPANCY? (Y/N)

FIELD EXAMINER  
DATABASE

N  
N  
N

D. PERIOD OF USE:

RECOMMEND AS CLAIMED?

RECOMMEND TO WR STANDARDS OR OTHER?

REMARKS:

Y ( ) N (X)  
Y (X) N ( )  
EXPLAIN IN REMARKS, BELOW.

A. DOES DIVERSION RATE CLAIMED AGREE WITH EXISTING RECORDS?

AD TOTAL CLAIMED DIVERSION RATE: 0.790 CFS  
 MR ROOT RIGHT TOTAL DIVERSION RATE: 0.790 CFS

\*\*\* IF NO OR IF STATUTORY CLAIM OR BENEFICIAL USE THEN FLOW MEASUREMENT REQUIRED. \*\*\*  
 \*\* IF AN AMOUNT SMALLER THAN THE ORIGINAL DIVERSION RATE IS \*\*  
 \*\* CLAIMED AND AN EXAM IS NOT REQUIRED, EXPLAIN IN REMARKS. \*\*

FLOW MEASUREMENT REQUIRED?

DUE TO STAGE OR DIVERSION RATE DISCREPANCY? (Y/N)

FIELD DATABASE EXAMINER  
 N

MEASUREMENT METHOD

SEE ATTACHED CALCULATIONS.

C. ARE OTHER WATER RIGHTS USED? ( ) ( ) IF YES COMPLETE OVERLAP REVIEW.

OTHER RIGHTS LISTED IN CLAIM:

ABERDEEN SPRING CANAL

LIST ALL RIGHTS WITH A SAME POU AND IRRIGATION USAGE:

| CLAIM       | SOURCE      | NAME                           | DIV. RATE | DIV. RATE/ACRE | DIV. VOL. | DIV. VOL./ACRE |
|-------------|-------------|--------------------------------|-----------|----------------|-----------|----------------|
| A35-07022   | GROUNDWATER | CHURCH OF JESUS CHRIST LATTER  | 0.790     | 0.020          | 57133.00  | 1.61           |
| A01-0205540 | SNAKE RIVER | LING, ROGER D.                 |           |                |           |                |
| A01-0002320 | SNAKE RIVER | LING, ROGER D.                 | 1250.000  | 0.035          |           |                |
| A35-0254320 | GROUNDWATER | LING, ROGER D.                 | 5.000     |                |           |                |
| A35-0424620 | GROUNDWATER | ABERDEEN SPRINGFIELD CANAL CO. | 2.140     |                | 129940.00 | 3.66           |
| A01-0205560 | SNAKE RIVER | LING, ROGER D.                 |           |                | 22850.00  | 0.64           |
| A01-0205580 | SNAKE RIVER | LING, ROGER D.                 |           |                |           |                |

NO RIGHTS WITH SAME POU BUT NOT USED FOR IRRIGATION

D.

RATE/VOLUME CALCULATIONS: (IRRIGATION)

## 1A. IRRIGATION RATE

ACRES ----- X 0.02 CFS/ACRE = ----- CFS  
(TAKEN FROM P/U REVIEW)

## 1B. CALCULATIONS

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

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

## 2. IRRIGATION CONSUMPTIVE USE

CLAIMED CONSUMPTIVE USE =

AF/A

ACRES 39 X CONSUMPTIVE VOL. AF/A FOR AREA 3 =TOTAL CONSUMPTIVE USE 117 AF/A

## 3. IRRIGATION DIVERSION VOLUME

COMBINED DIVERSION VOLUME =

AF/A

ACRES 39 X DIVERSION VOL. AF/A FOR AREA 4 =TOTAL DIVERSION VOLUME 156 AF/A

## 4. CALCULATIONS FOR USES OTHER THAN IRRIGATION:

SEE ATTACHED SHEET? Y( ) N( )

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

RECOMMENDATION:

REC.  
PURPOSES

REC. PERIOD  
FROM TO

REC. DIV  
DATE CTS

REC. DIV  
VOL. AF/A

REC. CONS.  
USE

IRRIGATION

04-15  
10-31

DATABASE EXAMINER  
0.730

DATABASE EXAMINER

DATABASE EXAMINER  
0.0

TOTAL FOR THIS RIGHT

411 1031

0.730

156

117

REVIEWED BY:

*[Signature]*

DATE: 11/6/92

A. CHECK ONLY THE FOLLOWING THAT APPLY:

OWNERSHIP  
FORFEIT/ABANDON  
ADDITIONAL DIV. AMOUNT

ACCEPTED  
AS CLAIMED  
(X)  
( )  
( )  
( )  
NEEDS  
REVIEW  
( )  
( )  
( )

B. SPLIT WATER RIGHT REVIEW

ROOT WATER RIGHT NUMBER: 35-07022  
TOTAL DIVERSION RATE OF WR SPLITS  
DATABASE 0.780  
EXAMINER  
CFS

SPLITS:

| OLD RIGHT<br>NUMBERS | CURRENT<br>CLAIM NUMBERS | DIVERSION<br>RATE | CURRENT "R"<br>CLAIM NUM. | "R" DIV.<br>RATE | WR RIGHT<br>NUMBERS | DIVERSION<br>RATE |
|----------------------|--------------------------|-------------------|---------------------------|------------------|---------------------|-------------------|
| -                    | A35-07022                | 0.780             | -                         | -                | 35-07022            | 0.780             |

TOTAL CFS 0.790  
FIELD EXAMINER

DIVERSION RATE REVIEW

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

DATABASE  
Y  
FIELD  
EXAMINER

REMARKS:

AUTHENTICATION:

SIGNATURE: *Steve LaPorte* DATE: 11/6/92

NAME OF FIELD EXAMINER: STEVE LAPOURTE TITLE: CHA

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

VERIFIED BY CODES

TOPG MAP/ORTHO-PQ = 1  
ASES MAP = 2  
MASTER RECORDS = 3  
APP PHOTOS = 4  
FIELD EXAM = 5  
OTHER (SEE REMARKS) = 6

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

# CONSERVATION PLAN MAP



Prepared by UNITED STATES DEPARTMENT of AGRICULTURE • SOIL CONSERVATION SERVICE  
cooperating with

OWNER  
OPERATOR

*Herbert J. ...*

DATE

FARM NO.

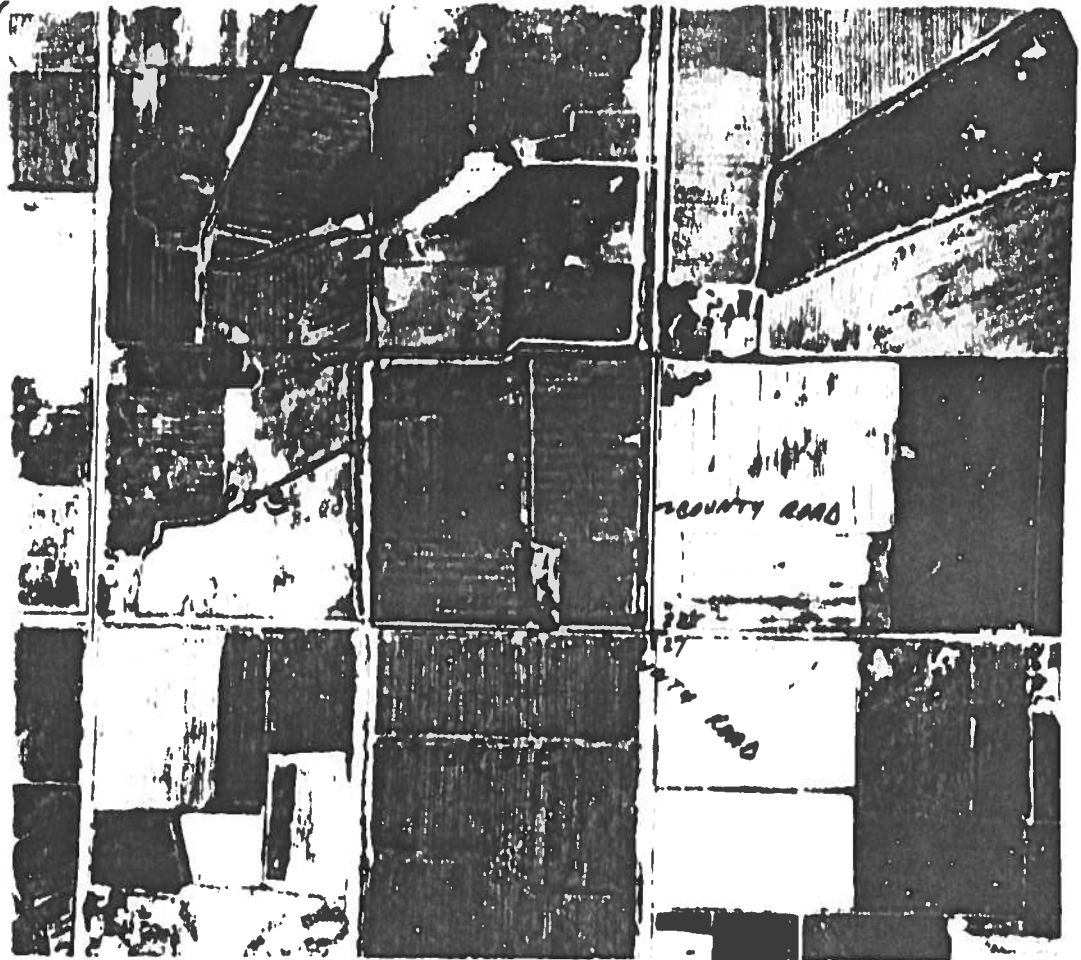
DATE

SCALE

ACRES

PHOTO NO.

T.  
H.  
S.



COUNTY ROAD

17  
COUNTY ROAD

25465-6-35