

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: A41-10051
Date Received: 3/06/1990
Receipt No: M006160
Received By: Heit

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MELVIN R. & MARY K. MUNK TRUST 208-548-2240
Address: P.O. BOX 112
ROCKLAND, ID 83271

2. Date of Priority: JUN 01, 1962

3. Source: SPRING Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	31E	2	SW	SW	SW		POWER

5. Description of diverting works:
SPRING PIPED INTO TROUGHS AND POND

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/70 LIVESTOCK

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
10S	31E	2	SW	SW		STOCK	

11. Place of use in counties: POWER

A41-10051

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Date: 03/27/90

MICROFILMED

MAR 02 1993

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

13. Other Water Rights Used:
NONE

14. Remarks:
NONE

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. A41-10051Date Received MAR. 6, 1990Receipt Number M006160NOTICE 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) Melvin R. AND Mary K Munk Trust Phone (208) 548-2240Mailing Address P.O BOX 112 ROCKLAND, IDAHO Zip 832712. Date of Priority (Only one per claim) 6-1-62 Month/Day/Year3. Source of water supply (Check one) () Groundwater or Other () (a) Spring

Name or kind of source

which is tributary to (b) SINKS4. Location of point of diversion is: Township 10 S Range 31 ESection 2, SW 1/4 of SW 1/4 of SW 1/4, Govt. Lot , BM.,County of POWERAdditional 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. Spring piped into troughs + pond

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

For Stockwater purposes from JAN 1 to DEC 31 amount 0.03 (cfs)

(Both dates are inclusive)

For purposes from to amount 7. Total quantity claimed .03 (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)

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MAR 8 2 1990

10. Place of use is: Township: 10 S Range 31 E
Section 2, SW 1/4 of SW 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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

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 or _____

14. Remarks: _____

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)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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) _____ Date _____

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am PRESIDENT OF TRUSTEES

of Melvin R & Mary K Munk TRUST, that I have signed the foregoing
document in the space below as President of trustees of Melvin R & Mary K Munk TRUST
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Martin Munk Date 3-6-90

Title and Organization President of trustees for Melvin R & Mary K Munk TRUST

State of Idaho/or _____)

County of Power) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 6 day of March 19 90

SEAL

Notary Public Dave Cals

Residing at Heise, Id

My Commission Expires 2/26/96

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 02 1993

AJ0749NP
No. R41-10051

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 05/10/99
PAGE: 1

VERIFIED BY

Sen

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MELVIN R & MARY K MUNK TRUST PO BOX 112 ROCKLAND ID 83271 (208) 548-2240	06/01/1962	STOCKWATER	01-01 12-31	0.03 CFS	
TOTAL DIVERSION:					0.03 CFS	

Water Source: SPRING

Tributary to: SINKS

Stage: BENEFICIAL USE

Point(s) of Diversion:

T10S R31E S02

SHNWSH

POWER County

Place of use Legal Description for: STOCKWATER

NE	NW	SW	SE
T R S : Lt Ac Lt Ac Lt Ac	NE NW NW NW NW NW	NE SW NW SW NW SW	NE SE NW SE NW SE
10S 31E 2 :	:	S	:

POU County: POWER

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP S/70 LIVESTOCK

Dates: Exam Made Date: 07/14/1994

Verified Date: 05/10/1999

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

CLAIM NO. A41-10051

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
CLAIM VERIFICATION EXAM SHEET
FOR DOMESTIC AND STOCKWATER CLAIMS IN PLACE OF A CVR

1. ☒ No Change NAME:
☐ NEW OWNER: _____
☐ No Change ADDRESS:
☐ NEW ADDRESS: _____
- ☒ DATA ENTRY STANDARDS CHECKED?
2. ☒ No Change - DATE OF PRIORITY: No Field Verification Needed.
☐ CHANGE- Priority date, per claimant, is _____.
(if the priority date, based on your exam, seems questionable,
explain in COMMENTS.)
3. ☒ No Change - SOURCE:
☐ CHANGE - Different Source found: _____
4. ☒ No Change - POINT OF DIVERSION:
☐ Point of diversion is different than the claim
New P/D: Twp. _____, Rge. _____, Sec. 2, SW 1/4 NW 1/4 SW 1/4
- Note: If the 10-acre tract is shown on the claim, then
verification of the 10-acre parcel is needed. Otherwise the
10-acre tract is not required, unless the source is a spring.
5. ☒ No Change - DESCRIPTION OF DIVERTING WORKS:
☐ Incomplete desc., complete items missing, IF KNOWN.
HP of pump _____ Static water level _____ Well depth _____
Casing size _____ Pumping water level _____ Gravity flow _____
Method of irr. _____
6. ☒ No Change - WATER USES:
☐ Different uses, (list uses found).
- | | | | | |
|-----------|------------|----------|------------------|----------|
| Use _____ | From _____ | To _____ | Amount _____ cfs | _____ af |
| Use _____ | From _____ | To _____ | Amount _____ cfs | _____ af |
7. ☒ No Change - TOTAL VOLUME:
☐ Change found, The new total is, -- -- -- _____ cfs _____ af
8. N/A
9. ☒ No Change - NON-IRRIGATION USES: Completed on claim
☐ Incomplete on claim - Exam found:
Domestic - No. of homes _____ Stockwater - No. of head _____
Other: _____
- ☒ DATA ENTRY STANDARDS (correct to..)

10. ☒ No Change - PLACE OF USE: (If changed, list below.)
Use Twp. Rge. Sec. 1/4, 1/4, 1/4

NW SW

11. ☐ Checked: N/A

12. ☐ Checked: N/A

13. ☒ No change - OTHER RIGHTS FOR SAME USE:
CHANGE: _____

14. ☐ None REMARKS: (copy existing remarks to comments in "R")

☒ Add the following standard remarks:
LIST STANDARD REMARKS FOR THE RECOMMENDATION:

Nil, Nil

15. ☒ BASIS OF CLAIM VERIFIED AS: D - L - P - S - J (circle one)

COMMENTS: (pertinent to field examination)

ATTACHMENTS: Attached to
This Form.

Attachments are
in Permit File.

PHOTOS

MAP

SYSTEM DIAGRAM

☒
☐
☐

☒
☐
☐

See file 41-00019

DATE EXAM CONDUCTED: 7-14-94

FIELD EXAMINER:

STEVE CLELLAND

Signature

Steve Clelland

REVIEWED BY/DATE:

Sa 5/10/99

DATA ENTRY BY/DATE:

VERIFICATION BY/DATE:

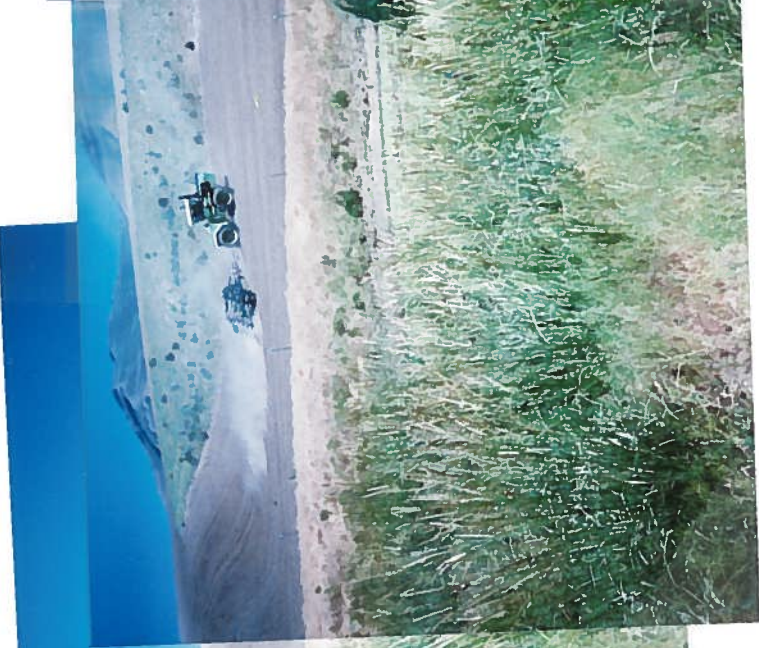


Photo: R41-9
by See
7-14-94

STOCK WATER SPRING DIVERSION.

A41-10050