

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: A41-10114

Date Received: 3/06/1990

Receipt No: 5011796

Received By: SCC

APR 4 1990

Department of Water Resources
Southern Region Office

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MELVIN MUNK 208-548-2241
Address: P.O. BOX 325
ROCKLAND, ID 83271

2. Date of Priority: APR 01, 1961

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	31E	10	SW	SE	NE	I	POWER
		11	SE	SW	NW	R	POWER

5. Description of diverting works:
FLOWING WELL TO ROCK CREEK, E. FK.; STANGER DITCH TO SPRINKLERS

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/ UP TO 1/2 ACRE IRRIGATION

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	31E	10	SE	NE		DOMEST	

11. Place of use in counties: POWER

A41-10114

Page 1

Date: 03/27/90

MICROFILMED

MAR U 2 1993

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

13. Other Water Rights Used:
A41-00019

14. Remarks:
FLOWING WELL WATER IS INJECTED INTO EAST FORK ROCK CREEK AND
EXCHANGED FOR WATER REDIVERTED AT STANGER DITCH WITH OTHER WR.

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): Melvin R. Munk Date: 4-3-90

Date: _____

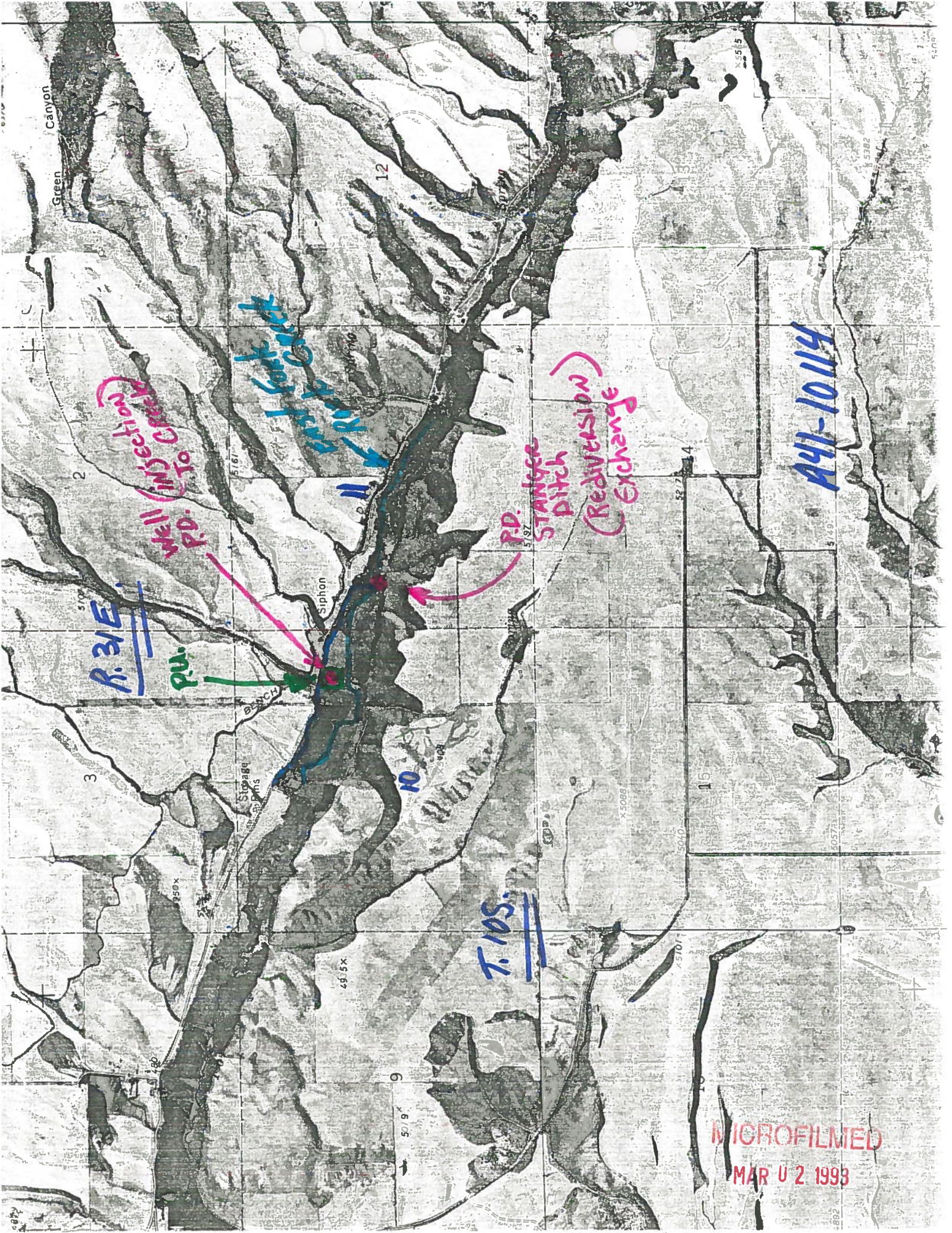
State of Idaho)
County of Power) SS.

Subscribed and sworn (or affirmed) before me this 3rd day
of April 19 90

Sonya d Anderson
Notary Public

Seal

Residing at Rockland
My Commission Expires 12/11/95



941-10114

MICROFILMED
MAR U 2 1993

41-10114

AJ5856NP

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

DATE: SEP-24-1997
PAGE: A-43

RIGHT NUMBER: 41-10114

NAME & ADDRESS: MELVIN MUNK
PO BOX 325
ROCKLAND ID 83271

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 04/01/1961

POINT OF DIVERSION: T10S R31E S10 NWSENE (INJECTION) Within POWER County
S11 SESWNW (REDIVERSION)

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

PLACE OF USE: DOMESTIC Within POWER County
T10S R31E S10 SENE

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

Revised

AJ5809NP
No. R41-10114

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 07/15/97
PAGE: 154

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	MELVIN MUNK PO BOX 325 ROCKLAND ID 83271 (208) 548-2241	04/01/1961	DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Injection: T10S R31E S10
Point(s) of Re-diversion: T10S R31E S11

BASENE
SESNM

POWER County
POWER County

Place of use Legal Description for: DOMESTIC

NE	NW	SW	SE
NE NE NAME SNAME SENE : NENW NWNW SNWV SENW : NESW NWSW SWSW SESW : NESE NWSE SWSE SESE :			
T R S : Lt Ac Lt Ac Lt Ac Lt Ac : Lt Ac Lt Ac Lt Ac Lt Ac : Lt Ac Lt Ac Lt Ac Lt Ac : Lt Ac Lt Ac Lt Ac Lt Ac :			
10S 31E 10 :	D :		

POU County: POWER

Non-irrigation Uses: D/ ~~UP TO 1 ACRE~~ IRRIGATION

1 1/2 acre lawn

Other Rights: A41-00019

Remarks: GEN FLOWING WELL WATER IS INJECTED INTO EAST FORK ROCK CREEK AND EXCHANGED FOR WATER REDIVERTED AT STANGER DITCH WITH OTHER WR.

Comm

N11
N13

Dates: Exam Made Date: 7/14/94

Verified Date:

Objection Filed Date:

Misc: Water District Number: 41

Field Inspection Flag:
Presumption Flag:

Audit: 05/29/97 DJONES

See
9/19/97

DATA ENTERED BY ac
DATE 9-23-97

Claims file w/see



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

March 11, 1998

MELVIN MUNK
1040 N 1300 W APT 34
SAINT GEORGE UT 84770-6436

RE: Snake River Basin Adjudication (SRBA)
Water Right No. 41-10114
Change of Address

RECEIVED
APR 03 1998
Department of Water Resources

Dear Water Right Holder:

Record Modified 04-06-98.

Mail recently sent to you was returned to us by the Postal Service. They also advised us your address has changed to the above address. We have enclosed the returned mail.

Although we have reached you at the address above, we need your written confirmation this is your correct mailing address before we can change our records.

Please sign your name at the bottom of this letter and return it to this office. Make corrections to your name and address if necessary before returning this letter, **list any other water right claims you have**, and return the letter by March 31, 1998. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records.

If there has been a change in ownership of the property connected with the water right referenced above, please call this office toll-free at 1-800/451-4129 to obtain a form to make this required change to the claim record.

Sincerely,

S. Sherman

Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region
Enclosures

The address is correct as shown above or as otherwise changed.

Melvin Munk
Claimant Signature

RECEIVED

APR 21 1998

Department of Water Resources
Southern Region

DIVERSION
VOLUME

0.04 CFS

Stage: BENEFICIAL USE

POWER County
POWER County

SE

• • • • •

Other Rights: 41-00019

N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A

N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000

Objection Filed Date:

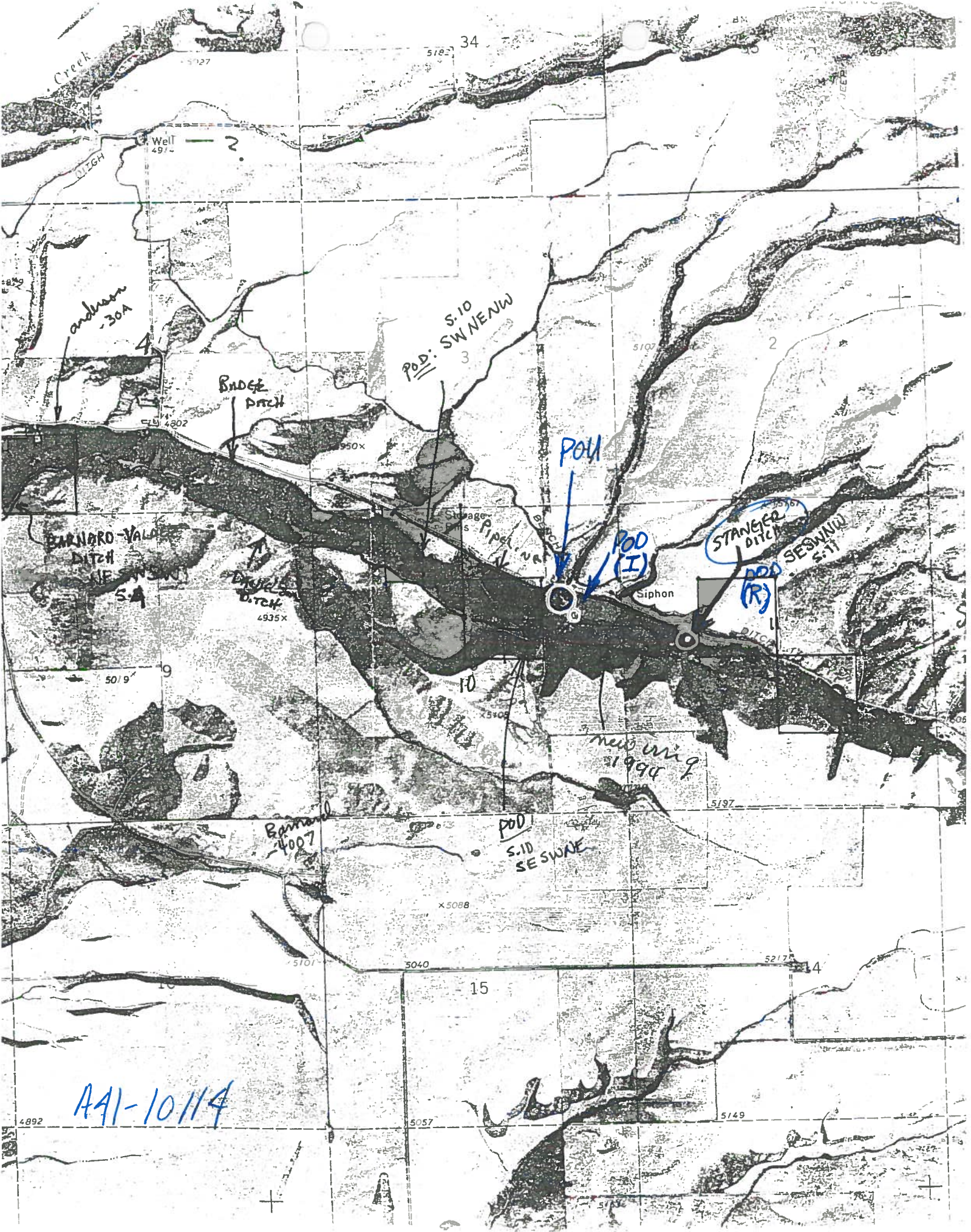
Field Inspection Flag:
Presumption Flag:

EXCHANGED FOR WATER REDIVERTED AT STANGER DITCH WITH OTHER WR.

Date: 04/06/1998 User-ID: SHERMAN Subject: ADDRESS CHANGE
ADDRESS CHANGE BY CLAIMANT LETTER.

Audit: 04/06/98 SSHERMAN

67107-124



CLAIM NO. AA1-10114

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. _____ 1/4 _____ 1/4 _____ 1/4
Correct Point of Injection: NWSENE
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

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:

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

☒
☒
☐

☐
☐
☐

DATE EXAM CONDUCTED: 7-14-94

FIELD EXAMINER: STEVE CLELLAND

Signature Steve Clelland

REVIEWED BY/DATE: See 9/19/97

DATA ENTRY BY/DATE: _____

VERIFICATION BY/DATE: _____



Flowing well.

Photo:
RAI-9
KMS
1/14/99

A41-10114