

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: A41-10130
Date Received: 4/02/1990
Receipt No: S011740
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: W. J. MEADOWS 208-226-2241
Address: 2781 ROCKY HOLLOW LN.
AMERICAN FALLS, ID 83211

OR

Name: VICKI MEADOWS 208-226-2241
Address: 2781 ROCKY HOLLOW LN.
AMERICAN FALLS, ID 83211

2. Date of Priority: JUL 10, 1966

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
09S	31E	21	SW	SE	NW		POWER

5. Description of diverting works:
8" X365' WELL, 1.5 AHP PUMP

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
09S	31E	21	SE NW		DOMEST	

11. Place of use in counties: POWER

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 _____

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RECEIVED

APR 2 1990

NOTICE OF CLAIM
TO A
WATER RIGHT

Department of Water Resources
Southern Region Office

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

- Name of Claimant (s) W.T. & Vicki MEADOWS Phone (208) 226-2041
Mailing Address 2781 Rocky Hollow Ln. Arco Falls ID. Zip 83211
- Date of Priority (Only one (1) per claim) ~~JULY 10, 1974~~ JULY 10, 1966
- Source of water supply (a) Groundwater
which is tributary to (b) _____
- Location of point of diversion is: Township 9 Range 31E
Section 21, SW 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, B.M.,
County of POWER
Additional points of diversion if any: Well, 8" casing, 365 FT. DEEP
- 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, 8" casing, 365' DEEP
1 1/2 HORSE SUBMERSIBLE PUMP, PIPE TO HOUSE
- Water is claimed for the following: (Limited to Domestic and/or Stockwater only. See Instructions)
(Both dates are inclusive)
For Domestic purposes from 1-1 to 12-31 amount .04 (cfs)
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed .04 (cfs)
- Total consumptive use claimed is de minimus
- Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of livestock) Domestic - 1 Home

MICROFILMED

MAR 02 1993

10. Place a "D" for domestic and "S" stockwater use in the corresponding place below.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
9	3/E	21								X								

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.
_____ or None (☒)

14. Remarks: _____

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice ☐ License ☐ Permit ☐
Decree ☐

If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

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 3

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

Signature of Claimant (s) Sub Hand Date 3/19/90
Will J. M... Date 3/19/90

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of Twin Falls) SS.

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

SEAL

Notary Public Robert V. Horstelt

Residing at Twin Falls, Idaho

My Commission Expires March 2, 1993

Last Name _____ Ident No. _____

Copies White-State, Yellow-Claimant



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. E, Twin Falls, Idaho 83301

(208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Apr. 6, 1990

W J MEADOWS
2781 ROCKY HOLLOW LN
AMERICAN FALLS ID 83211

Re: A29-10931
A29-10930
A41-10131
A41-10130

Dear Claimant(s):

Please review the computer generated claim(s) 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 12 1990

AJ5856NP

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

DATE: SEP-29-1997

PAGE: A-68

RIGHT NUMBER: 41-10130

NAME & ADDRESS: W J MEADOWS
VICKI MEADOWS
2781 ROCKY HOLLOW LN
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.

USE OF THIS RIGHT WITH RIGHT NO. 41-10131 IS LIMITED TO A
TOTAL COMBINED DIVERSION RATE OF 0.04 CFS.

PRIORITY DATE: 07/10/1966

POINT OF DIVERSION: T09S R31E S21 SWSNW Within POWER County

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

PLACE OF USE: DOMESTIC Within POWER County
T09S R31E S21 SENW

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

DATE: 09/18/97
PAGE: 1

DIVERSION RATE
DIVERSION VOLUME

0.04 CFS

0.04 CFS

Stage: BENEFICIAL USE

POWER County

SEE

• • • •

Non-Irrigation Uses: ~~DOMESTIC~~ 1 HOUSE

Remarks: GEN USE OF THIS RIGHT WITH RIGHT NO. 41-10131 IS LIMITED TO A TOTAL COMBINED DIVERSION RATE OF 0.04 CFS. QNT

QNT

Objection F

DATA ENTERED BY *SW*
DATE *9-24-97*

Stage: **BENEFICIAL USE**

POWER County

NE.

POU County: POWER

Non-Irrigation Uses: DOMESTIC 1 HOUSE

Other Rights: 41-10131

REMARKS: USE OF THIS RIGHT WITH RIGHT NO. 41-10131 IS LIMITED TO A TOTAL COMBINED DIVERSION RATE OF 0.04 CFS.

Dates: Exam Made Date: 07/21/1994 Verified Date: 07/28/1994

Misc:	Water District Number:	Field Inspection Flag	Measurement Error

Field Inspection Flag:
Presumption Flag:

partial decree
7-24-98
K

CLAIM NO. 441-10130

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
- 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: 41-10131

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

☒ Add the following standard remarks:

LIST STANDARD REMARKS FOR THE RECOMMENDATION:

1st Part of EDD combined Right limit 0.04 cfs

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: 7-26-94

FIELD EXAMINER:

STEVE CLELLAND

Signature

Steve Clelland

REVIEWED BY/DATE:

7-28-94 Sen

DATA ENTRY BY/DATE:

VERIFICATION BY/DATE:

R31E

T9S

SWSE NW
Pod/Pou

BB36

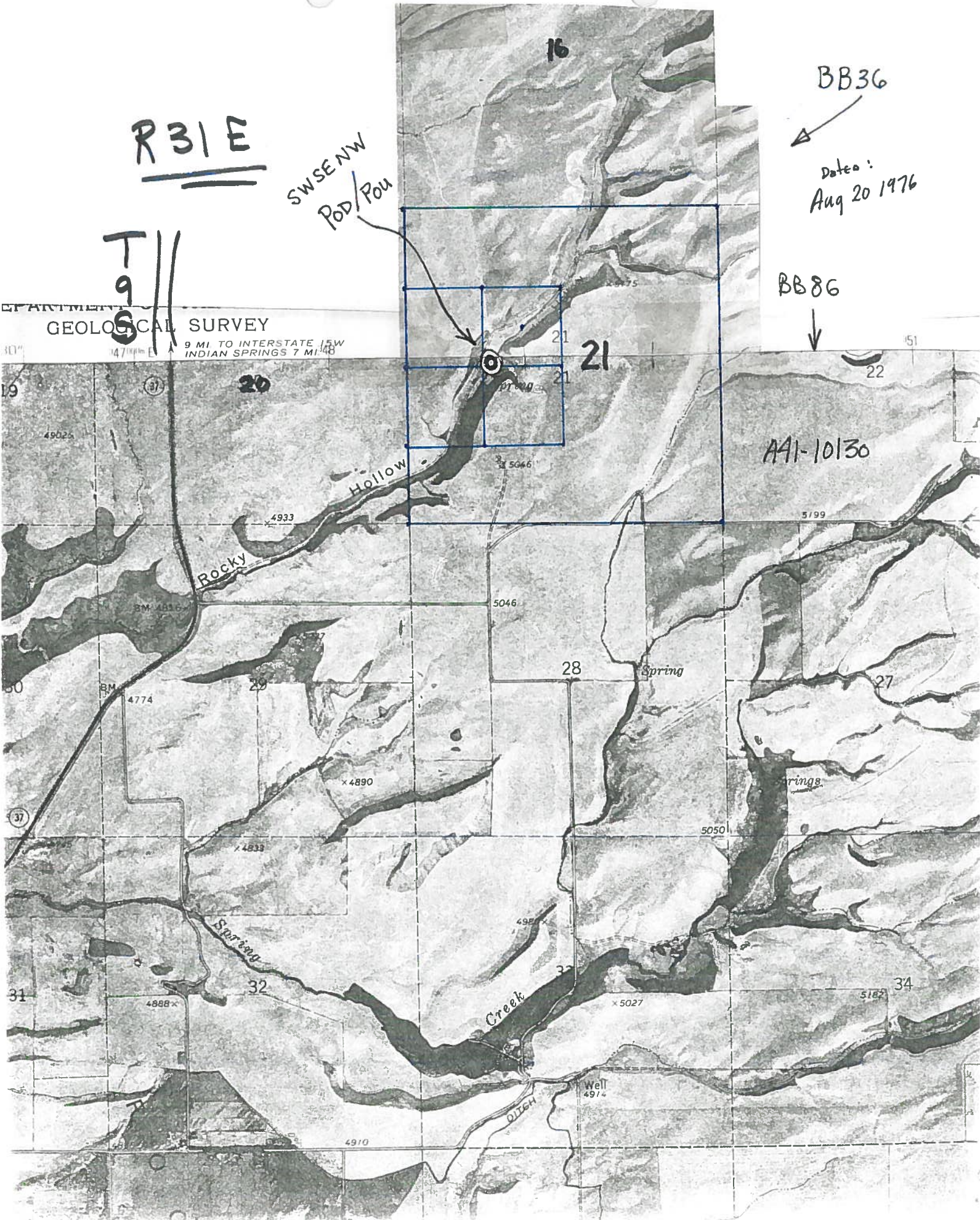
Date:
Aug 20 1976

BB86

A41-10130

DEPARTMENT OF
GEOLOGICAL SURVEY

9 MI. TO INTERSTATE 15W
INDIAN SPRINGS 7 MI. 48



7-21-94

Su

A41-10130 / A41-10131

met w/ Vicki MEADOWS

- she showed me the well house location.
- she showed me the spring used to supplement the domestic well.

No Diversion exists now but the spring has been used for domestic, most used now as a back up source.

Stockwater use is in stream of the stream from the springs.