

\$ 25

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

RECEIVED

APR 10 1990

Ident. Number: A41-10135
Date Received: 4/04/1990
Receipt No: 5011944
Received By: lw

Department of Water Resources
Southern Region Office

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ARTHUR H. NIELSON 208-232-8063
Address: 1655 EAST CENTER
POCATELLO, ID 83201

Name: BONNIE F. NIELSON 208-232-8063
Address: 1655 EAST CENTER
POCATELLO, ID 83201

2. Date of Priority: APR 30, 1880

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	31	NE	SE	NW		POWER

5. Description of diverting works:
ARTESIAN WELL

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	31	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:
SPRING CREEK, ROCK CREEK

14. Remarks:
BIG R FARM.

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): *Robert & Nellie J. Nelson* Date: _____
Bonnie L. Nelson Date: 4-9-90

State of Idaho)
County of Bannock) SS.

Subscribed and sworn (or affirmed) before me this 9th day
of April 19 90
Carol D. Mathis
Notary Public

Seal

Residing at Pocatello, Idaho
My Commission Expires January 30, 1993

INTER-DEPARTMENT MEMO — 1

DATE 4/10/90

FROM LORI WHITE

TO FILE

SUBJECT NO LATE FEE

I received claims A41-00057, -04039, -10135, -10136, + A29-07634 from Bonnie Nielson on 4/4/90 which she was ready to pay for at that time. I had some further questions about the fertilizer plants - that Mr. Nielson could only answer. Since the answers affected the total amount due, I personally extended the Nielson's deadline until the total fee was determined and submitted.

Lori White

SIGNATURE

MICROFILMED

MAR 12 1993

53

U-04 CFS

D-04 CFS

Stage: BENEFICIAL USE

POWER County

[illegible]

Other Rights: NONE

Verified Date: 07/19/1995

Field Inspection Flag:
Presumption Flag:

User-ID: SCLELLAN Subject: COPIED FROM REMARKS

07/19/95 SCELLAN

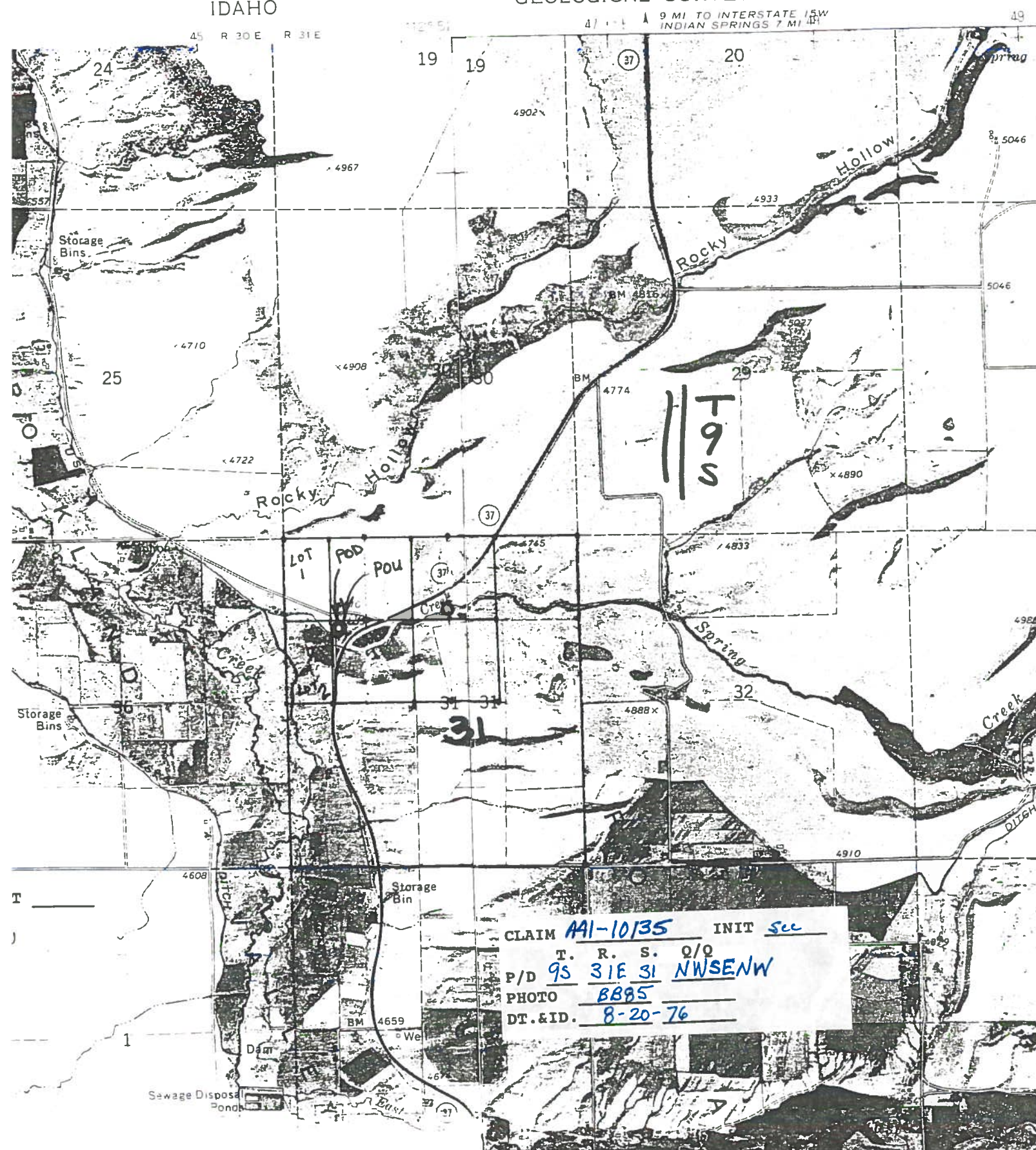
66-01-10-99

BBE

IDAHO

GEOLOGICAL SURVEY

9 MI TO INTERSTATE 15W
INDIAN SPRINGS 7 MI



CLAIM NO. _____

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.)

See map in
A41-4039
Claim map shows well site.
Exam 6-27-95
See
found well

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. 9S, Rge. 31E, Sec. 31, NW 1/4 SE 1/4 NW 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: NONE

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)

House is not useable, but water still piped to kitchen and
water used to outside uses via pipe from well. <see photo> R41-21

ATTACHMENTS: Attached to This Form. Attachments are in Permit File.

PHOTOS

MAP

SYSTEM DIAGRAM

DATE EXAM CONDUCTED: 6-27-95

FIELD EXAMINER:

Signature

REVIEWED BY/DATE:

DATA ENTRY BY/DATE:

VERIFICATION BY/DATE:

Photo: RA1-21
Mysel
6-27-95



↑
Black pipe
in Tree is used to
Deliver water to users
for outside uses.

WELL IS Located INSIDE
WELL HOUSE.

A41-10135