

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: A41-10139
Date Received: 4/04/1990
Receipt No: S011794
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: STEPHEN WEGNER 208-548-2349
Address: P.O. BOX 242
ROCKLAND, ID 83271
AND/OR
Name: ROBIN B. WEGNER 208-548-2349
Address: P.O. BOX 242
ROCKLAND, ID 83271
AND/OR
Name: F. FRED WEGNER 208-548-2247
Address: P.O. BOX 323
ROCKLAND, ID 83271
AND/OR
Name: CORALEA WEGNER 208-548-2247
Address: P.O. BOX 323
ROCKLAND, ID 83271

2. Date of Priority: MAR 15, 1913

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	30E	10		NW	SE		POWER

5. Description of diverting works:
WELL, 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.

A41-10139

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Date: 04/04/90

MICROFILMED
MAR 02 1993

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
11S	30E	10	NW SE		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): Stephen C. Hynes Date: 4-4-90

Date: _____

State of Idaho)
County of OF) SS.

Subscribed and sworn (or affirmed) before me this 4 day
of Apr 19 90 Don White
Notary Public

Seal

Residing at OF
My Commission Expires 5/94

June 11, 1999

**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: July 9, 1999

Water right number: 41-10139

STEPHEN WEGNER
ROBIN B WEGNER
PO BOX 242
ROCKLAND ID 83271

Daytime Telephone Number:

Evening Telephone Number:

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

X I AGREE with this proposed recommendation; no changes need to be made.

DATE: 6-30-99 SIGNATURE: Stephen E. Wegner
Please print your name: _____

AJ0749NP
No. R41-10139

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

DATE: 06/11/99
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	STEPHEN WEGNER	03/15/1913	DOMESTIC	01-01 12-31	0.04 CFS	
C	ROBIN B WEGNER					
	PO BOX 242					
	ROCKLAND ID 83271					
	(208) 548-2349					
TOTAL DIVERSION:						0.04 CFS

C F FRED WEGNER
C CORALEA WEGNER
PO BOX 323
ROCKLAND ID 83271
(208) 548-2247

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T11S R30E S10

NWSE

POWER County

Place of use Legal Description for: DOMESTIC

	NE	NW	SW	SE
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
11S 30E 10	:	:	:	:

POU County: POWER

Non-Irrigation Uses (D/I HOUSE)

Other Rights: NONE

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

111
1130

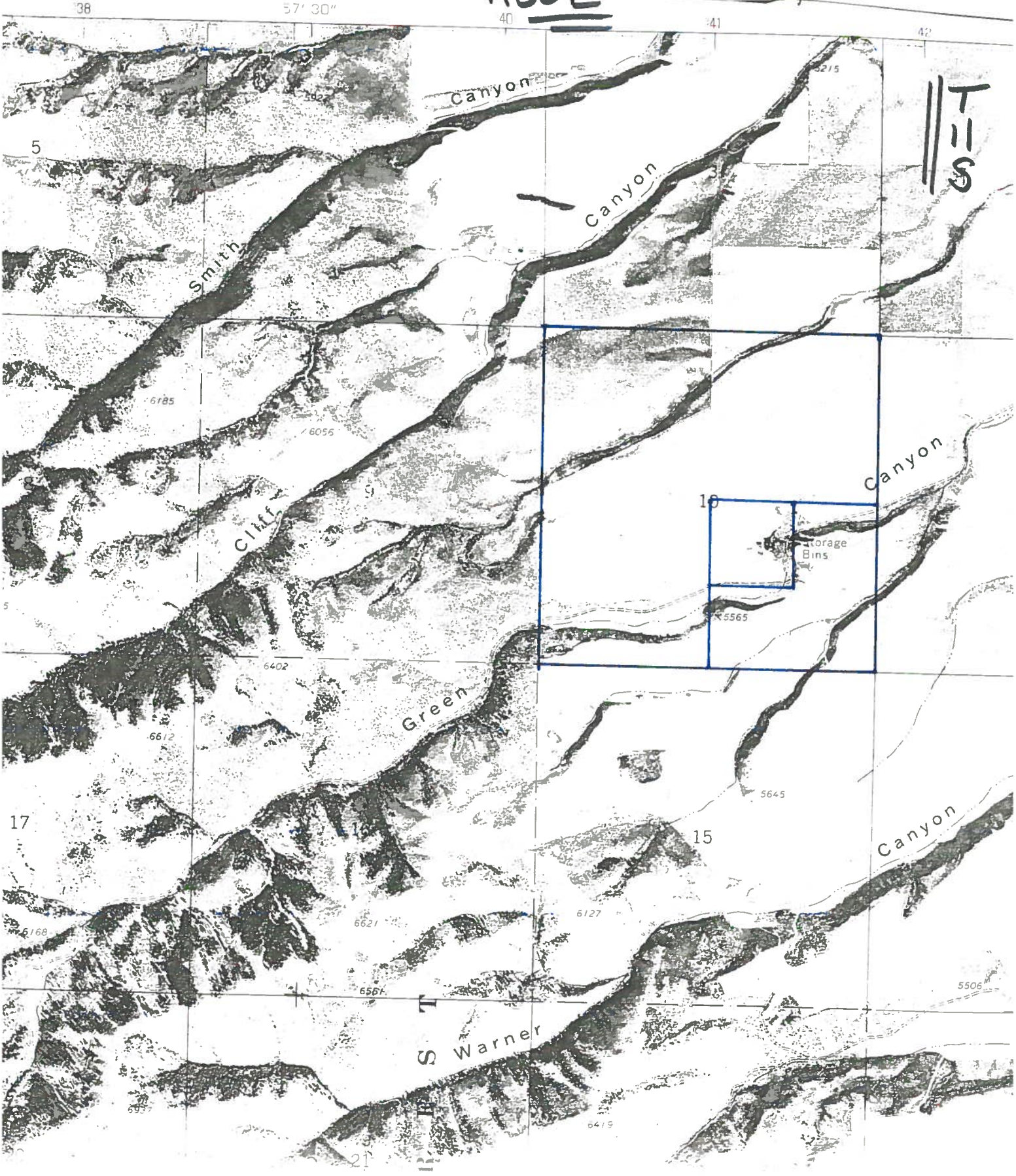
OK
Part B-
No House
Yard area
only

CC 35

Aug 20 1976

R30 E

T
||
S



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.)
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..)

Sec
6/99

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 Attachments are
 This Form. in Permit File.

PHOTOS

MAP

SYSTEM DIAGRAM

☐
☐
☐

☐
☐
☐

DATE EXAM CONDUCTED: _____

FIELD EXAMINER: _____

Signature _____

REVIEWED BY/DATE: _____

DATA ENTRY BY/DATE: _____

VERIFICATION BY/DATE: _____

Prefix Translation: ADJUDICATION CLAIM

Court Report Filing	-	00/00/0000	Field Inspection Made	-	00/00/0000	Civil Case Number	-	39576
Objection Filed Date	-	00/00/0000	Field Inspection Flag	-		Old Case Number	-	
Response Filed Date	-	00/00/0000	Verified Date	-	00/00/0000	Old Judicial District	-	
Claim Received Date	-	04/04/1990	Last Amended Date	-	00/00/0000	Temporary Right	-	P
Proof Due Date	-	00/00/0000	Proof Made Date	-	00/00/0000	Water District	-	
Licensed Date	-	00/00/0000	Receipt Number	-	S011794	Federal/State Indicator	-	S
Claims Tape Error Flag	-		POU Ownership Flag	-	Y	Presumption Flag	-	
See Exempt Flag	-		Name Connector	-	AND/OR		-	