

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: A41-10023
Date Received: 2/13/1990
Receipt No: S011193
Received By: see

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JENNIE OSBORN 208-548-2601
Address: P.O. BOX 173
AMERICAN FALLS, ID 83211
2. Date of Priority: DEC 31, 1971
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
09S	29E	20	SW	SE	SE		POWER
5. Description of diverting works:
WELL AND 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 of	Lot	Use	Acres
09S	29E	20	SE	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): Jennie L. Osborn Date: Feb. 13-1990

Date: _____

State of Idaho)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 13th day
of February 19 90

Stuart C. [Signature]
Notary Public

Seal

Residing at Twin Falls, Idaho

My Commission Expires December 7, 1994

BONANZA BAR

R. 29E.

R. 28E

R28E
R29E

Frymier Field

T. 9S.

P.D.
P.U.

A41-10023

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4462 POWER CO

AJ5856NP

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

DATE: SEP-24-1997

PAGE: A-14

RIGHT NUMBER: 41-10023

NAME & ADDRESS: JENNIE OSBORN
PO BOX 173
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.

PRIORITY DATE: 12/31/1971

POINT OF DIVERSION: T09S R29E S20 SWESE 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 R29E S20 SESE

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

Decreed: 7/24/98

Claim file w/su

AJ5809NP
No. R41-10023

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 09/22/97
PAGE: 3

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	JENNIE OSBORN PO BOX 173 AMERICAN FALLS ID 83211 (208) 548-2601	12/31/1971	DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T09S R29E S20

SMSSE

POWEE County

Place of use Legal Description for: DOMESTIC

NE	NW	SW	SE
MENE NAME SAME SENE : NENE NAME SAME SENE : NENE NAME SAME SENE : NENE NAME SAME SENE :			
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 :			
09S 29E 20 :			D :

POU County: POWER

Non-Irrigation Uses: HOUSE

Other Rights: NONE

Dates: Exam Made Date: 6/27/94

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

W13

9/22/97

DATA ENTERED BY 9-23-97

AJ5809NP
No. 41-10023

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 05/06/98
PAGE: 8

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	JENNIE OSBORN PO BOX 173 AMERICAN FALLS ID 83211 (208) 548-2601	12/31/1971	DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T09S R29E S20 SWSSE

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
09S 29E 20	:	:	:	:

POU County: POWER

Non-Irrigation Uses: 1 HOME

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.

Dates: Exam Made Date: 06/27/1994

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

CLAIM NO. A41-10023

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: _____

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 Claim File.

PHOTOS

MAP

SYSTEM DIAGRAM

☐
☐
☐
☐

☐
☒
☐
☐

DATE EXAM CONDUCTED: 6-27-94

FIELD EXAMINER:

Signature

Steve Chelland

Steve Chelland

REVIEWED BY/DATE: See 9/22/97

DATA ENTRY BY/DATE: _____

VERIFICATION BY/DATE: _____