

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: A41-10050
Date Received: 3/06/1990
Receipt No: MO06160
Received By: DC

RECEIVED
MAR 20 1990
Department of Water Resources

Southern Region Office **NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name: MELVIN R. & MARY K. MUNK TRUST 208-548-2240
Address: P.O. BOX 112
ROCKLAND, ID 83271

2. Date of Priority: JUN 01, 1962

3. Source: SPRING Trib. to: SINKS

4. Point of Diversion:

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

5. Description of diverting works:
POND FOR LIVESTOCK

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.030		

7. Total Quantity Appropriated is:
0.030 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
S/ UP TO 75 HEAD CATTLE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	31E	11	NE	NW		STOCK	

11. Place of use in counties: POWER

A41-10050

Page 1

Date: 03/06/90

MICROFILMED

MAR 02 1993

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 _____

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

Identification No. A41-10050Date Received 3/16/90Receipt Number MO06160

NOTICE OF CLAIM
TO A
WATER RIGHT

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) Melvin R and Mary K Munk Trust Phone (208) 548-2240
Mailing Address PO BOX 112 Rockland Idaho Zip 83221
- Date of Priority (Only one per claim) June 1, 1942 Month/Day/Year
- Source of water supply (Check one) () Groundwater or Other ☒ (a) Spring
which is tributary to (b) SINKS Name or kind of source
- Location of point of diversion is: Township 10S Range 31E
Section 11, 1/4 of NE 1/4 of NW 1/4, Govt. Lot , BM.,
County of Power
Additional points of diversion if any: Pond
- 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. Storage Pond
- Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For Stockwater purposes from JAN 1 Month/Day to Dec 31 Month/Day amount 0.03 (cfs)
(Both dates are inclusive)
For purposes from to amount
- Total quantity claimed 0.03 (cfs)
- Total consumptive use claimed is de minimus
- Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 5/ UP TO 75 HEAD CATTLE

MICROFILMED

MAR 02 1993

10. Place of use is: Township: 105 Range 31E
Section 11, NE 1/4 of NW 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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.
(4) None or _____

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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 do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date _____
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am President of Trustees

of Melvin R + Mary K Munk Trust, that I have signed the foregoing
document in the space below as President of trustees of Melvin R + Mary K Munk Trust
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Martin Munk Date 3-6-90

Title and Organization President of trustees for Melvin R + Mary K Munk TRUST

State of Idaho/or _____)

County of Power) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 6 day of March 1990

SEAL

Notary Public Dave Coles

Residing at Heise, Idaho

My Commission Expires 2/26/96

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Idaho **MAR 8 2 1993**

41-10050

AJ5856NP

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

DATE: SEP-24-1997

PAGE: A-21

RIGHT NUMBER: 41-10050

NAME & ADDRESS: MELVIN R & MARY K MUNK TRUST
PO BOX 112
ROCKLAND ID 83271

SOURCE: SPRING TRIBUTARY: SINKS

QUANTITY: 0.03 CFS

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

PRIORITY DATE: 06/01/1962

POINT OF DIVERSION: T10S R31E S11 NENW Within POWER County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.03 CFS

PLACE OF USE: STOCKWATER Within POWER County
T10S R31E S11 NENW

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
S/ UP TO 75 HEAD CATTLE

Decreed: 7/24/98

DATE: 07/15/97
PAGE: 107

DIVERSION
VOLUME

0.03 CFS

0.03 CFS

Stage: BENEFICIAL USE

POWER County

SE

00 00 00 00

exp

$$\begin{matrix} 211 \\ 113 \end{matrix}$$

21

Field Inspection Flag:
Presumption Flag:

POST-STD

9/18/97 see

DATA ENTERED BY
DATE 9-23-97

Claims file w/ser

DATE: 05/06/98
PAGE: 15

Stage: BENEFICIAL USE

POWER County

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● ● ■ ■ ◆ ◆ ◆ ◆

- GALLONS PER DAY.

objection Filed Date:

Field Inspection Flag:
Presumption flag:

CLAIM NO. A41-10050

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. _____, NE 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 Permit File.

PHOTOS

MAP

SYSTEM DIAGRAM

☒
☐
☐

☐
☐
☐

DATE EXAM CONDUCTED:

7-14-94

FIELD EXAMINER:

Steve Clelland

Signature

Steve Clelland

REVIEWED BY/DATE:

See 9/18/97

DATA ENTRY BY/DATE:

VERIFICATION BY/DATE:

Photo:
R41-10
by SCC
7-14-94



Stock Spring A

A41-10050
Munk



CATCH DAM.

