

MAR-03-1997
0012

RIGHT NUMBER: 72-10431
NAME AND ADDRESS: MYRON D COMBS
YVONNE E COMBS
PO BOX 162
CLAYTON ID 83227
SOURCE: GROUNDWATER
QUANTITY: 0.06 CFS

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

PRIORITY DATE: 08/31/1981
POINT OF DIVERSION: T11N R17E S30 SWSWSE Within CUSTER County
PURPOSE AND PERIOD OF USE: DOMESTIC 1 HOME 01-01 12-31 QUANTITY 0.06 CFS
PLACE OF USE: DOMESTIC T11N R17E S30 SWSE Within CUSTER County

OTHER MATTERS 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
PARCEL NO. 000730000042
PROPERTY IS ALSO KNOWN AS LOT 4, SPRING CREEK SUBDIVISION.

PT

AJ5809NP
No. R72-10431

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

OWNER
CODE

NAME & ADDRESS

C MYRON D COMBS
C YVONNE E COMBS
PO BOX 162
CLAYTON ID 83227
(208) 838-2363

PRIORITY
DATE

08/31/1981 DOMESTIC

WATER USE

USE PERIOD
FROM TO
01-01 12-31

DATE: 01/17/97
PAGE: 13

DIVERSION
RATE
0.06 CFS

DIVERSION
VOLUME
0.06 CFS

Water Source: GROUNDWATER

Point(s) of Diversion:

Tributary to:

T11N R17E S30

Place of use Legal Description for: DOMESTIC

T R S : NENE NWNE SWNE SENE : NENW NWNW SWNW SENW : NESH NWSW SWSW SESW : NESE NWSE SWSW SESE :
11N 17E 30 : 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 :
POU County: CUSTER

Non-Irrigation Uses: 1 HOME
Other Rights: NONE

Stage: BENEFICIAL USE
CUSTER County

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
- N13 - DETERMINATION OF HISTORICAL BENEFICIAL USE.
- THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP

PARCEL NO. 000730000042
PROPERTY IS ALSO KNOWN AS LOT 4, SPRING CREEK SUBDIVISION.

Dates:

Exam Made Date:

Water District Number:

Verified Date:

Field Inspection Flag:
Presumption Flag:

Objection Filed Date:

Comments: Date: 03/03/1993 User-ID: CLELLAND Subject: CHANGE OF OWNERSHIP
FORM AND DEED SUBMITTED BY COMBS.

Date: 03/03/1993 User-ID: CLELLAND Subject: COPIED FROM REMARKS
POSTMARKED 1/12/1990.

Date: 01/14/1997 User-ID: DS1-PROD subject: D&S 1 HOME UPDATE

OK

AJ5809MP
No. R72-10431

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 01/17/97
PAGE: 14

Comments: Date: 01/14/1997 User-ID: DS1-PROD Subject: D&S 1 HOME UPDATE
USE-NOT-IRRIGATION FIELD TEXT REPLACED WITH "1 HOME".
CONDITION CODES N11 AND N13 ADDED IF NOT ALREADY PART OF RECORD.
ANY GEN REMARK CHANGED TO AN EXP REMARK.

Audit: 03/03/93 CLELLAND 07/06/93 SMITH 03/30/95 POST-STD 01/14/97 DS1-PROD

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: **A72-10431**
Date Received: 1/17/1990
Receipt No: S010971
Received By: See Above

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

1. Name: MYRON D COMBS 208-838-2363
Address: PO BOX 162
CLAYTON ID 83227

AND

Name: YVONNE E COMBS 208-838-2363
Address: PO BOX 162
CLAYTON ID 83227

2. Date of Priority: AUG 31, 1981

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11N	17E	30	SW	SW	SE		CUSTER

5. Description of diverting works:
6" X 300' WELL, 3/4HP SUBMERSIBLE PUMP, PIPE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.060		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11N	17E	30	SW	SE		DOMEST	

11. Place of use in counties: CUSTER

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE

14. Remarks:
#4, SPRING CREEK SUBDIVISION.
POSTMARKED 1/12/1990.

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 _____



NEW PROPERTY OWNER NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type
(see instructions on back of page)

RECEIVED

FEB 26 1993

DATE OF CLOSING: 7/1/1990

Department of Water Resources
Southern Region Office

LEGAL DESCRIPTION OF PROPERTY: Township 11N Range 17E
Section 30, SW 1/4 of SW 1/4 of SE 1/4, Govt. Lot , BM.
Lot , Block , Subdivision/Townsite #4, SPRING CREEK SUBDIVISION

If you have additional legal descriptions, please attach separate sheet.

CLAYTON, IDAHO 83227

☐ Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis)

☐ Water Right Number(s)
Assigned by IDWR: A72-10431

☐ Name and Address of Former Owner/Claimant(s)(Seller): Michael and Alice Beasley, Byers, Co. 80103

☐ New Owner/Claimant (Purchaser): Myron D. Combs and Yvonne E. Combs

☐ New Mailing Address: P.O. Box 162
Clayton, Idaho 83227

☐ New Telephone Number: (208) 838-2363

☐ Does the change in ownership result in a splitting of the water right owned/claimed? yes ☒ no
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:

☐ Attach proof of ownership, describe proof attached: Copy of Warranty Deed Copy of Water Right

(proof of ownership must describe either the property conveyed or include the claim number. Proof of ownership is not required if this form is signed by the former owner/claimant.)

☐ Signature of New Owner/Claimant(s) Myron D. Combs Date 2/24/93

Yvonne E. Combs Date 2/24/93

☐ Signature of Former Owner/Claimant(s): _____ Date _____

(Signature of former claimant(s) is not required if proof of ownership is attached.)

FOR IDWR USE ONLY:

Initial Review and Data-Entry

Date: 3-3-93 By: See

Further Action Needed:

NONE

Further Action Taken

Date: _____ By: _____

Final Review and Data-Entry

Date: _____ By: _____

Claim Numbers of Split, if any:

Original to be mailed to Idaho Department of Water Resources
Copies to Former Owner and New Owner

MICROFILMED

MAR 19 1993

WARRANTY DEED

For Value Received - **MICHAEL L. BEASLEY and ALICE BEASLEY, husband and wife,**

the grantor **S**, do hereby grant, bargain, sell and convey unto **MYRON D. COMBS and YVONNE E. COMBS, husband and wife,**

RECEIVED

the grantee **S**, whose current address is **P.O. Box 162, Clayton, ID 83227**

FEB 26 1993

the following described premises, in **Custer** County, Idaho, to-wit: **Department of Water Resources Southern Region Office**

Lot 4, Spring Creek Subdivision, Custer County, Idaho, as shown by the Official Plat thereof, now on file in the office of the said County Recorder.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantee **S**, **their** heirs and assigns forever. And the said Grantor **S** do hereby covenant to and with the said Grantees, that **they are** owner **S** in fee simple of said premises; that they are free from all incumbrances

and that **the Y** will warrant and defend the same from all lawful claims whatsoever.

Dated. **June 1, 1990.**

Michael L. Beasley

Alice Beasley

COPY

COLORADO
STATE OF ~~IDAH~~

COUNTY OF

On this _____ day of _____, in the year 19 **90**, before me, a Notary Public, personally appeared **MICHAEL L. BEASLEY & ALICE BEASLEY,** known or identified to me to be the person whose name **s** are subscribed to the within instrument, and acknowledged to me that **the Y** executed the same

Notary Public

Residing at _____, Idaho.

My Comm. Expires:

STATE OF IDAHO, COUNTY OF **CUSTER**

I hereby certify that this instrument was filed for record at the request of

_____ minutes past _____ o'clock M.,
this _____ day of _____,
19 _____, in my office, and duly recorded in Book
of Deeds at page _____

Ex-Officio Recorder

By _____

Deputy.

Fees \$
Mail to:





State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

CECIL D. ANDRUS
Governor

MARCH 3, 1993

R. KEITH HIGGINSON
Director

MYRON D & YVONNE E COMBS
PO BOX 162
CLAYTON ID 83227

RE: CHANGE IN OWNERSHIP FOR SRBA CLAIM NO. A72-10431

DEAR MR. & MRS. COMBS,

PURSUANT TO YOUR REQUEST FOR A CHANGE IN OWNERSHIP AND/OR THE NOTIFICATION THAT YOU PRESENTLY OWN THE PROPERTY IN WHICH THE ABOVE-REFERENCED ADJUDICATION CLAIM(S) IS APPURTENANT, THE DEPARTMENT HAS CHANGED THE RECORD OF THE CURRENT OWNERS AS YOU REQUESTED. PLEASE FIND ENCLOSED A COPY OF YOUR ADJUDICATION CLAIMS AS THEY NOW APPEAR IN OUR RECORDS.

IF YOU HAVE ANY FURTHER CORRECTIONS OR QUESTIONS PLEASE CONTACT OUR OFFICE.

SINCERELY,

A handwritten signature in cursive script, appearing to read 'Steve Clelland'.

STEVE CLELLAND
WATER RESOURCE AGENT

ENC:
SCC

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MAR 19 1993

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: A72-10431
Date Received: 1/16/1990
Receipt No: S010971
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MICHAEL BEASLEY
Address: P.O. BOX 33
BYERS, CO

80103

AND

Name: ALICE BEASLEY
Address: P.O. BOX 33
BYERS, CO

80103

2. Date of Priority: AUG 31, 1981

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11N	17E	30	SW	SW	SE		CUSTER

5. Description of diverting works:
6" X 300' WELL, 3/4HP SUBMERSIBLE PUMP, PIPE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.060		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

A72-10431

Page 1

Date: 01/17/90

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MAR 19 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
11N	17E	30	SW SE		DOMEST	

11. Place of use in counties: CUSTER

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE

14. Remarks:
#4, SPRING CREEK SUBDIVISION.
POSTMARKED 1/12/1990.

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

CIVIL CASE NUMBER: 39576

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

Identification No. _____
Date Received _____
Receipt Number _____

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JAN 16 1990

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) BEASLEY, Michael + Alice Phone () _____
Mailing Address P.O. Box 33 Byers, Colo Zip 80103

2. Date of Priority (Only one per claim) 8-81 Month/Day/Year

3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source

4. Location of point of diversion is: Township 11N Clayton, Idaho Range 17E Spring Creek Subdivision #4
Section 30, SW 1/4 of SW 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of Custer

Additional points of diversion if any: _____

5. 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 head + 80' pipe to trailer well 6" casing 300' deep 3/4 hp. submersible pump.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For domestic purposes from 8-31-1 to 12-31 amount 0.06 (cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.06 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 10 people (1 household) 2 small animals

MAR 19 1993

10. Place of use is: Township: Clayton Range Spring Creek Subdivision #4

Section _____, _____ 1/4 of _____ 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? Custer

12. Do you own the property listed above as place of use? Yes X 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.

X None or _____

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use X 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 X 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)

Michael L Beasley
Shirley Beasley

Date

Jan 13, 1990

Date

Jan 12, 1990

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of ~~Idaho~~ or Colorado)

County of Arapahoe) ss.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 12th day of January 19 90

SEAL

Notary Public

Theresa C. Gingle
P. O. Box 295 Byers, CO 80103

Residing at _____

My Commission Expires 11-23-92

Last Name BEASLEY Ident No. _____

Copies: White-State, Yellow-Clanum

MAR 19 1993

Stanley
P.O. Box 33
Byron, Colo 80103

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MAR 19 1993



Utah Dept of Water Resources
2148 4th Ave. East
Durin Falls, Utah 83301



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

. Jan. 19, 1990

Re: A72-10431

. MICHAEL BEASLEY
. P O BOX 33
. BYERS CO 80103

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim 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 you claim(s), please contact this office.

Yours truly,

A handwritten signature in dark ink, appearing to read 'Judy Givens', is written over a horizontal line.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 19 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

· Myron Combs
· Box 162
· Clayton ID 83227

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

MAILING DATE: Feb 18, 1993

RESPONSE DATE: March 5, 1993

RE: NOTICE OF CLAIM NO[S]: A72-10431

Dear Claimant(s):

We are currently preparing the Notice(s) of Claim referenced above for the Director's Report in the Snake River Basin Adjudication. Our research indicates there may have been a change in either the ownership or address for the above claim(s). IDWR records currently show the following name and address for the owner of the claim(s) listed above:

· Michael & Alice Beasley
· P.O. Box 33
· Byers CO 80103

If our current records, as listed above, are not correct please complete the enclosed Change in Ownership or Change of Address form, as appropriate, to correct our records.

Your response must be received in this office by the **Response Date** indicated above. If no response is received from you, all further legal notices concerning the claim(s) will be sent to the name and address shown above. If you have claims other than those referenced here, please contact the Department so we may assist you in updating the information for all your claims. Should you have any questions, or feel that you need assistance, please contact IDWR at 1-800-451-4129.

Sincerely,

Donald V. Shaff
Manager Adjudication Section

state:region

Enclosures:

Change of Ownership Form
Change of Address Form

MICROFILMED

MAR 19 1993



Ken Dean
**NEW PROPERTY OWNER
NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP**

Please print or type
(see instructions on back of page)

FEB 20 1993

Department of Water Resources
Southern Region Office

DATE OF CLOSING: 7/1/1990

LEGAL DESCRIPTION OF PROPERTY: Township 11N Range 17E
Section 30, SW 1/4 of SW 1/4 of SE 1/4, Govt. Lot , BM.
Lot , Block , Subdivision/Townsite #4, SPRING CREEK SUBDIVISION
If you have additional legal descriptions, please attach separate sheet.
CLAYTON, IDAHO 83227

☐ Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis)

☐ Water Right Number(s)
Assigned by IDWR: A72-10431

☐ Name and Address of Former Owner/Claimant(s)(Seller): Michael and Alice Beasley, Byers, Co. 80103

☐ New Owner/Claimant (Purchaser): Myron D. Combs and Yvonne E. Combs

☐ New Mailing Address: P.O. Box 162
Clayton, Idaho 83227

☐ New Telephone Number: (208) 838-2363

☐ Does the change in ownership result in a splitting of the water right owned/claimed? yes ☒ no
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:

☐ Attach proof of ownership, describe proof attached: Copy of Warranty Deed Copy of Water Right

(proof of ownership must describe either the property conveyed or include the claim number. Proof of ownership is not required if this form is signed by the former owner/claimant.)

☐ Signature of New Owner/Claimant(s) *Myron Combs* Date 2/24/93
Yvonne E Combs Date 2/24/93

☐ Signature of Former Owner/Claimant(s): _____ Date _____

(Signature of former claimant(s) is not required if proof of ownership is attached.)

FOR IDWR USE ONLY:

Initial Review and Data-Entry

Date: 3-3-93 By: ser

Further Action Needed:

NONE

Further Action Taken

Date: _____ By: _____

Final Review and Data-Entry

Date: _____ By: _____

Claim Numbers of Split, if any:

MICROFILMED

NOV 01 1994

Original to be mailed to Idaho Department of Water Resources
Copies to Former Owner and New Owner

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street
Boise, Idaho 83706-2237

XXXX01 ID 837 OCR 1 02-22-93 17:31



FORWARDING
ORDER EXPIRED

RECEIVED
MAR 5 1993

MICHAEL/ALICE BEASLEY
PO BOX 33
BYERS CO 80103

Department of Water Resources

MICROFILMED
NOV 01 1994



65103-0633





State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

· Myron Combs
· Box 162
· Clayton ID 83227

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

MAILING DATE: Feb 18, 1993

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· P.O. Box 33
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Sincerely,

Donald V. Shaff
Manager Adjudication Section

state:region

Enclosures:

Change of Ownership Form
Change of Address Form

MICROFILMED

NOV 0 1993

