

DATA ENTRY BY _____

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: A63-19918
Date Received: 11/20/1989
Receipt No: C011404
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MYRL D. SCHROEDER 208-939-2083
Address: 6065 KAREN DR.
MERIDIAN, ID 83642
AND
Name: MARCELLA R. SCHROEDER 208-939-2083
Address: 6065 KAREN DR.
MERIDIAN, ID 83642

2. Date of Priority: JUL 03, 1969

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of SW	1/4 of NE	1/4 of NW	Lot	County
04N	01E	29					ADA

5. Description of diverting works:
1 1/4" PIPE, 75' DEEP, 3/4 HP SUBMERSIBLE PUMP, PIPE TO HOME

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/I HOME

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
04N	01E	29	NE NW		DOMEST	

11. Place of use in counties: ADA

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 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 _____

A63-19918

Page 2

Date: 12/21/89

Form No. 4

IN RE THE
OF RIGHT
THE SNA

RECEIVED
NOV 2

Depart

Please to:

1. Name

Main

2. Date

3. Source

which

4. Location

Section

County

Address

5. Description

change of

6. Water

7. Title

8. To

9. Name

10. Address

11. Date

12. Signature

13. Date

14. Signature

15. Date

16. Signature

17. Date

18. Signature

19. Date

20. Signature

21. Date

22. Signature

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: 39578

Identification No. 63-1998

Date Received 1/20/89

Receipt Number 2011404

RECEIVED NOTICE OF CLAIM **RECEIVED**
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
Department of Water Resources

Department of Water Resources

Where Daily Use is less than 13,000 gallons per day
Department of Water Resources

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Myrl D & Marcelle R. Schmedlen Phone 208 989-2083

Mailing Address 6065 Kanan Dr. Meridian, Id. 208 23642

2. Date of Priority (Only one per claim) 7/3/69 Month/Day/Year

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

4. Location of point of diversion is: Township 4N Range 1E

Section 29 SW 1/4 of NE 1/4 of NW 1/4 Gov. Lot _____ B.M.

County of Ada

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Flumes, Headgates 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. 1 1/2" pipe 75' deep 3/4 hp submersible pump
Pipe to house

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See instructions.)
For Domestic purposes from Jan 1 to Dec 31 amount 0.04 (cfs)
(both dates are inclusive)
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (cfs)

8. Total consumptive use claimed is 0.04 cfs minimum

9. Non-irrigation uses. Describe fully. Domestic give number of households served if single ownership; Stockwater: Type and Number of livestock 5 horses

10. Place of use
Section 29

for (Circle One)
Additional place _____

11. In which of _____

12. Do you own _____
if your answer is _____

13. Describe _____
☒ None of _____

14. Remarks _____

15. Basis of Claim _____

Court _____

If applicable provide _____

16. Signature
(a) By signature of _____
received and paid _____

Number of Affidavits _____

For individual use _____

Signature _____

For Organization _____

of _____

document _____

and that the _____

Signature of _____

Title and Office _____

State of Idaho _____

County of _____

Subscriber _____

25x10

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25x10

10. Place of use is: Township 41 Range 1E
Section 29 NE 1/4 of NW 1/4, Govt. Lot _____, S.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? Ada
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.
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 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) Marcella Schaefer Date 9/8/89
John Schaefer Date 4/9/91

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____ Organization _____ that I have signed the foregoing
document in the space below as _____ Title _____ Organization _____

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

Signature of Authorized Agent _____

Title and Organization _____

State of Idaho (or) _____

County of _____

Subscribed and sworn (or affirmed) before me this 9th day of November 19 89

SEAL

Notary Public

Residing at

My Commission Expires

Ident No.

Last Name

Copies: White-State, Yellow-Claimant

NOTARIZATION REQUIRED FOR EACH CLAIM

25x10

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CLAIMANT'S NAME <u>Schmedel</u>	CLAIM IDENT. NO. <u>100</u>	
DATE RECEIVED <u>11/21/89</u>	CK # <u>1</u>	AMOUNT \$ <u>100</u>
	YES	NO
1. Is the name and address complete with zip code?	☒	☐
2. Is a priority date entered?	☒	☐
Is the priority date acceptable in view of mandatory filing dates?	☒	☐
See Adjudication Memo #1 and #4 to determine if a Permit is required.	☒	☐
3. (a) Is a source entered?	☒	☐
(b) Is a tributary to entered? (if required)	☒	☐
4. Is the legal description of the p.d. sufficient?	☒	☐
5. Is there a description of the diverting works?	☒	☐
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form.	☒	☐
Is the period of use included?	☒	☐
Is a quantity claimed for each use?	☒	☐
7. Is a total quantity claimed entered?	☒	☐
8. If required is a consumptive use entered?	☒	☐
Is the consumptive use correct?	☒	☐
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo #4.	☒	☐
10. Is (are) the place(s) of use and purpose(s) indicated?	☒	☐
11. Is (are) the county(ies) entered?	☒	☐
12. Is the ownership of p.w. checked?	☒	☐
13. Are other water rights listed or "none" indicated?	☒	☐
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.)	☒	☐
15. Is the basis of the claim indicated?	☒	☐
16. If the claimant requested a monthly docket sheet, is payment enclosed? (if yes, describe payment status in "Comments" below.)	☒	☐
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block.	☒	☐
18. Has the claim been signed, sealed, and dated by a notary?	☒	☐
19. Was this claim filed on time, or was an extension granted?	☒	☐
20. Is the fee enclosed correct?	☒	☐
21. If this claim is based on an existing water right, has the identification number been entered?	☒	☐
22. Should this claim be data entered?	☒	☐
Claim checked by: <u>RLT</u>	Date: <u>12/21/89</u>	
Claim must be returned to claimant:	(Yes) ☒ (No) ☐	
Claimant must be notified of modifications:	(Yes) ☒ (No) ☐	
Receipt Prepared by: <u>RLT</u>	Date: <u>12/21/89</u>	
Claim data entered by: <u>RLT</u>	Date: <u>12/21/89</u>	
Sent to claimant by: <u>RLT</u>	Date: <u>12/21/89</u>	
Comments: <u>3</u>		

25x10

32x10

October 23, 1989

Ms. Marcella R. Schroeder
6065 Karen Drive
Meridian, Idaho 83642

RE: Snake River Basin Adjudication
Ada County

Dear Ms. Schroeder:

We are returning your Notice of Claim to a Water Right which you filed on September 8, 1989, in order to correct an error which we, unfortunately, did not catch when you submitted your form.

Your signature was not notarized, which is a required element of the claim form and we cannot process the form unless it is notarized. Also, the names of the claimants in Item 1 are listed as Myrl D. and Marcella R. Schroeder. Since the names are connected with "and", both people must sign the form, having their signatures notarized. You may wish to change the name connector to "and/or", thereby requiring only one signature to be notarized.

In either case, please make the necessary corrections and return the form to this office. If the corrected form is returned by November 23, 1989, late fees will not be applied. Please do not hesitate to contact this office if you have any questions or need assistance.

Sincerely,


Donald V. Shatt
Manager, Adjudication Section

DVS:HNT:clp
Enclosures:
Notice of Claim

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