

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-158

RIGHT NUMBER: 45-10205

NAME & ADDRESS: BONNIE TURNER
RUFUS TURNER
BOX 29
MURTAUGH ID 83344

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 12/31/1930

POINT OF DIVERSION: T11S R20E S08 SWSW Within TWIN FALLS County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within TWIN FALLS County
T11S R20E S08 SWSW

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
PARCEL NO. 11S20E086020

Claim proofread by: EL

Date: 9-25

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: A45-10205
Date Received: 1/24/1989
Receipt No: S006010
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: BONNIE TURNER 208-432-5548
Address: BOX 29
MURTAUGH, ID 83344

OR
Name: RUFUS TURNER 208-432-5548
Address: BOX 29
MURTAUGH, ID 83344

2. Date of Priority: DEC 31, 1930

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	20E	8	SW	SW	SW		TWIN FALLS

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	Lot	Use	Acres
11S	20E	8	SW SW		DOMEST	

11. Place of use in counties: TWIN FALLS

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

13. Other Water Rights Used:
NONE

14. Remarks:

OUR FATHER OWNED THE PROPERTY AND GAVE US THE LAND TO BUILD A
HOME FOR EACH BROTHER, BUT ONLY ONE WELL.
WELL IS ON ROY TURNER'S PROPERTY.

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. A45-10205
Date Received Dec 9 - 1988 ADP
Receipt Number 500 6010 SC

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

1. Name of Claimant (s) Bonnie or Refus TURNER Phone (208) 432-5548Mailing Address Box 29 Murtaugh, Idaho Zip 833442. Date of Priority (Only one per claim) 12-31-1930 Month/Day/Year3. 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 11S Range 20ESection 8, SW 1/4 of SW 1/4 of SW 1/4, Govt. Lot _____, BM.,County of Twin Falls

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 and Pump.

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

For Domestic purposes from 1-1 to 12-31 amount .04 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .04 (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) 8/1

MICROFILMED

MAR 09 1993

10. Place of use is: Township: 11 S Range 20 E
Section 8, SW 1/4 of SW 1/4, Govt. Lot _____, B.M.,
County of Twin Falls 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? Twin Falls

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.

Owned by Roy & Ray Turner
14. Remarks: Grandfather owned the property and gave us the land to build a home for each brother - but only one well. Well is on Roy Turner's Property.
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 0

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Bonnie Turner Date 12/9/88

Date _____

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

of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
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 _____)

County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 9th day of Dec. 19 88

SEAL

Notary Public Allen D. Murrell

Residing at Kimberly, Id.

My Commission Expires 6/30/94

Last Name _____ Ident No. _____

MICROFILMED
Copies: White-State, Yellow-Claimant
MAR 09 1993

WATER RIGHT NUMBER - A45-10205

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - - LAST NAME - - - - - + + - FIRST NAME - - + + - - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
TURNER

BONNIE

1 - BOX 29

2 -

3 -

CITY- MURTAUGH

STATE- ID ZIP- 83344

PHONE - 208-432-5548

TURNER

RUFUS

1 - BOX 29

2 -

3 -

CITY- MURTAUGH

STATE- ID ZIP- 83344

PHONE - 208-432-5548

+ - - PRIORITY DATE - - + + - - REGION - - - + + - - STAGE - - - + + - - STATUS - - - - +
12/31/1930 ERROR IN REGION J - BENEFICIAL USE+ - - - - - SOURCE - - - - - + + - - - - - TRIBUTARY - - - - - +
GROUNDWATER+ - - - - - POINT OF DIVERSION - - - - - +
TWN RNG SEC TRACT LOT RFLG COUNTY STREAM INDEX (BLANK IF NO INDEX CODE)

11S 20E 8 SW SW SW (83) TWIN FALLS

+ - - - - - WATER USE - - - - - +
CODE DESCRIPTION PERIOD FROM PERIOD TO DIVERSION RATE DIVERSION VOLUME

43 - DOMESTIC

01/01

12/31

0.040

+ - TOTAL DIV. RATE - + + - TOTAL DIV. VOLUME - + + - TOTAL DIV. CAPACITY - + + - TOTAL CONSUMPTIVE USE - + + - KW USAGE - +
0.040 0.0+ - - - - - PLACE OF USE - - - - - +
TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION COUNTY

11S

20E

8

SW SW

43 DOMESTIC

(83) TWIN FALLS

+ - - DIVERSION MEANS - WELL AND PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - - REMARKS - - - - - +

OUR FATHER OWNED THE PROPERTY AND GAVE US THE LAND TO BUILD A
HOME FOR EACH BROTHER, BUT ONLY ONE WELL.
WELL IS ON ROY TURNER'S PROPERTY.+ - - - - - OLD WATER RIGHT NUMBERS - - - - - +
NO OLD WATER RIGHT NUMBERS FOUND.MICROFILMED
OCT 27 1994

WATER RIGHT NUMBER - A45-10205

PREFIX TRANSLATION: ADJUDICATION CLAIM

NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - + + - - - - DECREE DEFENDANT - - - + + - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 01/24/89 CLELLAND 10/17/89 REFUNDML

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+ - - - - - - - - - - - - - - - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +
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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	- 01/18/1989	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	- S006010	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	- DR	NOTICE OF ERROR FLAG	-

11520E086020

DATA ENTRY

ENTERED 6/22/92 BW
CHECKED 2/7/93

"Verified By"
 Topo Map/Ortho-PQ
 ASCS Map
 Watermaster Records
 NAPP Photos
 Field Exam
 Other (See Remarks)
 County Records
 Witness Statement
 Project Records
 IDWR Records

VERIFIED
OCT 30 1991

PROOF
SEP 16 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER