

AJ0749NP
No. R45-10297

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 01/15/98
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	EZRA DAVIDSON	03/15/1970	DOMESTIC	01-01 12-31	0.04 CFS	
C	MARIE DAVIDSON					
	PO BOX 314					
	BURLEY ID 83318					
	(208) 678-5634					
				TOTAL DIVERSION:	0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T10S R23E S28

SESWNW

CASSIA 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
10S 23E 28	:				:				:				:			

POU County: CASSIA

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.

Remarks: EXP PARCEL NO. 10S23E284190 (T3324 & 3419)

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:

Presumption Flag:

Comments: Date: 01/15/1998 User-ID: JROBERTS Subject: CORRECTED POD
CORRECTED POD TO SWNW AS CASSIA COUNTY COURTHOUSE SHOWS THAT IS
WHERE THIS PARCEL IS LOCATED. jr

Audit: 01/15/98 JROBERTS

RIGHT NUMBER: 45-10297

NAME & ADDRESS: EZRA DAVIDSON
MARIE DAVIDSON
PO BOX 314
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 03/15/1970

POINT OF DIVERSION: T10S R23E S28

PURPOSE AND
PERIOD OF USE: PURPOSE OF USE
DOMESTIC 1 HOME

PLACE OF USE: DOMESTIC
T10S R23E S28

SE6WSW

Within CASSIA County
SWNW

PERIOD OF USE QUANTITY
01-01 12-31 0.04 CFS

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. 10S23E284190 (T3324 & 3419)

Claim proofread by: CN

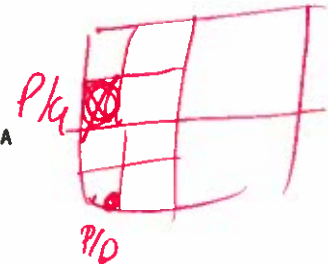
Date: 9-26

*Cassia Cty. Ct. house shows this
parcel as located in "SWNW".
9/15/98*

SWNW

*P/D P1/4 apart
Approx 1/2 mi apart
Held A.T.I.*

KKC



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: A45-10297
Date Received: 3/30/1989
Receipt No: S006726
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: EZRA DAVIDSON 208-678-5634
Address: P.O. BOX 314
BURLEY, ID 83318

AND/OR

Name: MARIE DAVIDSON 208-678-5634
Address: P.O. BOX 314
BURLEY, ID 83318

2. Date of Priority: MAR 15, 1970

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	23E	28	SE	SW	SW		CASSIA

5. Description of diverting works:
6" X 93' WELL, 1/2 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, WITH YARD

A45-10297

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Date: 03/30/89

MICROFILMED

MAR 09 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	23E	28	SW	NW		DOMEST	

11. Place of use in counties: CASSIA

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): x Ezra Erickson Date: x 3/30/89

Date: _____

State of Idaho)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 30th day
of March 19 89

Robert V. Korstall
Notary Public

Seal

Residing at Twin Falls, Idaho
My Commission Expires 1/16/1995

MICROFILMED
OCT 27 1994

