

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-427

RIGHT NUMBER: 45-10653

NAME & ADDRESS: DARLA D REDMAN
ODEEN REDMAN
PO BOX 22
350 SE HWY 77
ALBION ID 83311

SOURCE: GROUNDWATER

QUANTITY: 0.07 CFS

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

PRIORITY DATE: 06/12/1974

POINT OF DIVERSION: T12S R25E S16 SWNESE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.03 CFS
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T12S R25E S16 NESE

DOMESTIC Within CASSIA County
T12S R25E S16 NESE

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. 12S25E167200
STOCKWATER, 52 CATTLE, 2 HORSES

KRC
Claim proofread by: CA

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: A45-10653
Date Received: 5/18/1989
Receipt No: S007187
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DARLA D. REDMAN 208-673-5353
Address: P.O. BOX 22
350 SE HWY 77
ALBION, ID 83311

AND

Name: ODEEN REDMAN 208-673-5353
Address: P.O. BOX 22
350 SE HWY 77
ALBION, ID 83311

2. Date of Priority: JUN 12, 1974

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
12S	25E	16	SW	NE	SE		CASSIA

5. Description of diverting works:
8"X 100' WELL, 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		
STOCKWATER	01/01	12/31	0.030		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE S/52 CATTLE, 2 HORSES

A45-10653

Page 1

Date: 05/18/89

MICROFILMED

MAR 08 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
12S	25E	16	NE	SE		DOMEST	
			NE	SE		STOCK	

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

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MAR 08 1993

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. A45-10653

Date Received _____

Receipt Number 500 7187 *ccc*

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

MAY 15 1989

Department of Water Resources
Southern Region Office

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) ODEEN K. & DARLA D. REDMAN Phone (208) 673-5353

Mailing Address P.O. Box 22 - Hwy 77 - Albion, Idaho Zip 83311

2. Date of Priority (Only one per claim) June 12, 1974 Month/Day/Year

3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 12 S Range 25 E

Section 16, SW 1/4 of NE 1/4 of SE 1/4, Govt. Lot _____, BM.,

County of Cassia

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 8" casing 100' deep

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

For Domestic purposes from 01/01 ^{Month/Day} to 12/31 ^{Month/Day} amount .04 (cfs)

(Both dates are inclusive)
For Stockwater purposes from 01/01 to 12/31 amount .03

7. Total quantity claimed .07 (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) 1 Household 52 Cow & Calves 2 Horses

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MAR 08 1993

10. Place of use is: Township: 12 S Range 25 E

Section 16, NE 1/4 of SE 1/4, Govt. Lot _____, B.M.,

County of Cassia for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any None

11. In which county (ies) are lands listed above as place of use located? Cassia

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. None (X)

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)

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) OK Redman Date 5/10/89
Naula Redman Date 5-10-89

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 _____)
County of Cassia) SS.

Subscribed and sworn (or affirmed) before me this 10th day of May 1989

SEAL

Notary Public Betty Perry

Residing at Albion, Cassia County, Idaho

My Commission Expires 4/28/94

Last Name Redman Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 08 1993



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

Aug 1, 1989

Re: A45-10653

DARLA D REDMAN
P O BOX 22
350 SE HWY 77
ALBION ID 83311

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 your claim(s), please contact this office.

Yours truly,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 08 1993

WATER RIGHT NUMBER - A45-10653

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - - LAST NAME - - - - - +

+ - FIRST NAME - - +

+ - - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
REDMAN

DARLA D.

1 - P.O. BOX 22
2 - 350 SE HWY 77
3 -
CITY- ALBION
PHONE - 208-673-5353
1 - P.O. BOX 22
2 - 350 SE HWY 77
3 -
CITY- ALBION
PHONE - 208-673-5353

STATE- ID ZIP- 83311

STATE- ID ZIP- 83311

REDMAN

ODEEN

+ - - PRIORITY DATE - - +
06/12/1974

```

+ - - - REGION - - - +
  ERROR IN REGION

```

+ - - - STAGE - - - +
J - BENEFICIAL USE

+ - - - STATUS - - - - +

+ - - - - SOURCE - - - - - +
GROUNDWATER

+ - - - - - - - - - - TRIBUTARY - - - - - - - - - - - - - - - - +

[illegible]

125 25E 16 SW NE SE (31) CASSIA

| CODE | DESCRIPTION | PERIOD FROM | PERIOD TO | DIVERSION RATE | DIVERSION VOLUME |
|-----------------|-------------|-------------|-----------|----------------|------------------|
| 43 - DOMESTIC | | 01/01 | 12/31 | 0.040 | |
| 04 - STOCKWATER | | 01/01 | 12/31 | 0.030 | |

| + | - | TOTAL DIV. RATE | - | + | - | TOTAL DIV. VOLUME | - | + | - | TOTAL DIV. CAPACITY | - | + | - | TOTAL CONSUMPTIVE USE | - | + | - | KW USAGE | - | + |
|---|---|-----------------|---|---|---|-------------------|---|---|---|---------------------|---|---|---|-----------------------|---|---|---|----------|---|---|
| | | 0.070 | | | | | | | | | | | | 0.0 | | | | | | |

| TWN | RNG | SEC | TRACT | LOT | ACRES | PLACE OF USE
CODE | DESCRIPTION | COUNTY |
|-----|-----|-----|-------|-----|------------------|----------------------|-------------|--------------|
| 12S | 25E | 16 | NE SE | | ~~74.14~~ | 04 | STOCKWATER | (31) CASSIA |
| 12S | 25E | 16 | NE SE | | | 43 | DOMESTIC | (31) CASSIA |

+ - - DIVERSION MEANS - 8"X 100' WELL, PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE S/52 CATTLE, 2 HORSES

+ - - OTHER RIGHTS FOR SAME USE - NONE

| + | REMARKS | + |
|---|-------------------|---|
| | NO REMARKS FOUND. | |

----- OLD WATER RIGHT NUMBERS -----
NO OLD WATER RIGHT NUMBERS FOUND.

MICROFILMED
OCT 28 1994

WATER RIGHT NUMBER - A45-10653

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - CONDITIONS OF APPROVAL - - - - -
NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 05/18/89 CLELLAND

+ - - - - COMMENTS - - - - -
NO COMMENTS FOUND

+ - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - -

COURT REPORT FILING - 00/00/0000
OBJECTION FILED DATE - 00/00/0000
RESPONSE FILED DATE - 00/00/0000
CLAIM RECEIVED DATE - 05/18/1989
PROOF DUE DATE - 00/00/0000
LICENSED DATE - 00/00/0000
CLAIMS TAPE ERROR FLG -
FEE EXEMPT FLAG -

FIELD INSPECTION MADE - 00/00/0000
FIELD INSPECTION FLAG -
VERIFIED DATE - 00/00/0000
LAST AMENDED DATE - 00/00/0000
PROOF MADE DATE - 00/00/0000
RECEIPT NUMBER - S007187
POU OWNERSHIP FLAG - Y
NAME CONNECTOR - AND

CIVIL CASE NUMBER - 39576
OLD CASE NUMBER -
OLD JUDICIAL DISTRICT -
TEMPORARY RIGHT - P
WATER DISTRICT -
FEDERAL/STATE INDICATOR - S
PRESUMPTION FLAG -
NOTICE OF ERROR FLAG -

12525E167200
~~13633-600 1324~~

DATA ENTRY
ENTERED 12-1-92
CHECKED 2/6/93

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

VERIFIED
OCT 27 1991

PROOF
SEP 10 1991

CERTIFIED
OCT 29 1991
WATER EXAMINER