

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-470

RIGHT NUMBER:

45-10707

NAME & ADDRESS:

DENNIS F HENDRICKSON
RT 1 BOX 296
RUPERT ID 83350

SOURCE:

GROUNDWATER

QUANTITY:

0.06 CFS

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

PRIORITY DATE:

03/01/1905

POINT OF DIVERSION:

T09S R25E S19

SWSE

Within CASSIA County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

STOCKWATER

01-01 12-31

0.02 CFS

DOMESTIC 1 HOME

01-01 12-31

0.04 CFS

PLACE OF USE:

STOCKWATER

Within CASSIA County

T09S R25E S19

SWSE

DOMESTIC

Within CASSIA County

T09S R25E S19

SWSE

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. 09S25E194800

STOCKWATER, 40 LIVESTOCK

KKC

Claim proofread by:

Date:

9-26

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: A45-10707
Date Received: 5/22/1989
Receipt No: S007245
Received By: See

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DENNIS F. HENDRICKSON 208-436-6479
Address: RT. 1 BOX 296
RUPERT, ID 83350

2. Date of Priority: MAR 01, 1905

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
09S	25E	19	SW	SE			CASSIA

5. Description of diverting works:
6"X 65' WELL, 3/4 HP 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	0.020		

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 S/40 LIVESTOCK

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
09S	25E	19	SW	SE		DOMEST	
			SW	SE		STOCK	

A45-10707

Page 1

Date: 05/22/89

MICROFILMED
MAR 08 1993

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): _____ 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 FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. A45-10707

Date Received _____

Receipt Number 3007245 seeNOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

MAY 22 1989

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) Dennis F. Hendrickson Phone () 436-6479Mailing Address Box #1 Box 296 Rupert Ida Zip 833502. Date of Priority (Only one per claim) 1905 Month/Day/Year march 1-19053. 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 9S Range 25E B.M.Section 19 SW 1/4 of SE 1/4 of _____ 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 6.5 feet deep 6 inch casing 3/4 hp motor
water level 40 ft

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

For Domestic purposes from 1-1 to 12-1 ^{Month/Day} ^{Month/Day} amount 0.04 ^(cfs)For Livestock purposes from 1-1 to 12-1 to _____ amount 0.02
(Both dates are inclusive)7. Total quantity claimed 0.06 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) one house 40 livestock

MICROFILMED

MAR 08 1993

10. Place of use is: Township: 95 Range 25E

Section 19, SW 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 _____

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 ()

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) I want no

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) Dennis F. Hendrickson Date 5-16-89

Ethelyn Hendrickson Date 5-17-89

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

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 Cassia } SS. 519-12-6983

County of _____

Subscribed and sworn (or affirmed) before me this _____ day of _____ 19 _____

SEAL Notary Public Bruce A. [Signature]
Residing at Boise Idaho
My Commission Expires 4/11/95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant
MICROFILMED
MAR 08 1993

Southern Regional Office
Ida. Dept Water Res.
2148 4th Ave East
Therm. Falls Ida 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

July 19, 1989

Re: A45-10707

FRED SAMPLES
RT 3 BOX 3098
BURLEY ID 83318

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,

A handwritten signature in cursive script, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 08 1993

