



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098
Phone: (208) 327-7900 FAX: (208) 327-7866

RECEIVED

APR 02 1998

Department of Water Resources
Southern Region

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

March 11, 1998

RECEIVED

MAR 20 1998

MAX GLAESEMANN
425 TAMI DR
BURLEY ID 83318

RE: Snake River Basin Adjudication (SRBA)
Water Right No. 45-10745
Change of Address

Department of Water Resources

*record modified; LEAD prepared.
no 03.25.98*

Dear Water Right Holder:

Mail recently sent to you was returned to us by the Postal Service. They also advised us your address has changed to the above address. We have enclosed the returned mail.

Although we have reached you at the address above, we need your written confirmation this is your correct mailing address before we can change our records.

Please sign your name at the bottom of this letter and return it to this office. Make corrections to your name and address if necessary before returning this letter, list any other water right claims you have, and return the letter by March 31, 1998. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records.

If there has been a change in ownership of the property connected with the water right referenced above, please call this office toll-free at 1-800/451-4129 to obtain a form to make this required change to the claim record.

Sincerely,

S. Sherman

Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region
Enclosures

The address is correct as shown above or as otherwise changed.

Max Glaesemann

Claimant Signature

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-506

RIGHT NUMBER: 45-10745

NAME & ADDRESS: MAX GLAESEMANN
RT 4
27 S TAMI DR
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.06 CFS

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

PRIORITY DATE: 05/22/1974

POINT OF DIVERSION: T10S R22E S21 NWSENE 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
T10S R22E S21 SENE

DOMESTIC Within CASSIA County
T10S R22E S21 SENE

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. 10S22E211300
STOCKWATER



Claim proofread by: CA

Date: 9-22

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: A45-10745
Date Received: 5/23/1989
Receipt No: S007274
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MAX GLAESEMANN 208-678-3330
Address: RT. 4
27 S. TAMI DR.
BURLEY, ID 83318

2. Date of Priority: MAY 22, 1974

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	22E	21	NW	SE	NE		CASSIA

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		
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/l HOUSE S/STOCK

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	22E	21	SE	NE		DOMEST	

A45-10745

Page 1

Date: 05/23/89

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MAR 08 1993

10. Place of Use: Continued

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	22E	21	SE	NE		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:
P/U STARR'S FERRY PARK SUBD.

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. A45-10745
Date Received 5-22-1989
Receipt Number 5007274 scNOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

MAY 23 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) Max Glaeseman N Phone (678) 3330Mailing Address At 4 275 Tami Dr Zip 833182. Date of Priority (Only one per claim) 5-22-74 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) Sand Point
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 10S Range 22ESection 21, NW 1/4 of SE 1/4 of NE 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 and pump

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

For domestic purposes from Jan 1 to Dec 1 amount .04 (cfs)For stock purposes from Jan 1 to Dec 1 amount .02 (Both dates are inclusive)7. Total quantity claimed .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) house

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MAR 26 1993

10. Place of use is: Township: 10 S Range 22 E

Section 21, SE 1/4 of NE 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 445-10715

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 (X)

14. Remarks: STARR'S Ferry Park Subdv. - Cassia Co.
Tax # 3711

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 _____

By signing I/We acknowledge reading the notice on the back of this claim form.
I/We wish to receive for a small annual fee monthly copies of the docket sheet.
YES _____ NO _____

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

Signature of Claimant (s) X May Glawemanno Date X 5-22-89
_____ Date _____

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 22nd day of May 1989

SEAL

Notary Public Robert V. Thurstell

Residing at Twin Falls, Idaho

My Commission Expires 1/16/1995

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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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

July 19, 1989

Re: A45-10745
A45-10746

MAX GLAESEMANN
RT 4
27 S TAMI DR
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, likely belonging to Judy Givens.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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MAR 08 1993

WATER RIGHT NUMBER - A45-10745

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
GLAESEMANN

MAX

1 - RT. 4
2 - 27 S. TAMI DR.
3 -
CITY- BURLEY
PHONE - 208-678-3330

STATE- ID ZIP- 83318

+ - - PRIORITY DATE - - +
05/22/1974

```

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

```

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

+ - - - STATUS - - - - +

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

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

| TWN | RNG | SEC | TRACT | LOT | RFLG | COUNTY | POINT OF DIVERSION | STREAM INDEX (BLANK IF NO INDEX CODE) |
|-----|-----|-----|-------|-----|------|--------|--------------------|---------------------------------------|
| 06 | 09 | 07 | 00 | 00 | 00 | 00 | 00 | 00 |

10S 22E 21 NW SE NE (31) CASSIA

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

| | | | |
|-----------------|-------|-------|-------|
| 43 - DOMESTIC | 01/01 | 12/31 | 0.040 |
| 04 - STOCKWATER | 01/01 | 12/31 | 0.020 |

| + - TOTAL DIV. RATE - + | + - TOTAL DIV. VOLUME - + | + - TOTAL DIV. CAPACITY - + | + - TOTAL CONSUMPTIVE USE - + | + - KW USAGE - + |
|-------------------------|---------------------------|-----------------------------|-------------------------------|------------------|
| 0.060 | | | 0.0 | |

| TWN | RNG | SEC | TRACT | LOT | ACRES | PLACE OF USE
CODE | DESCRIPTION | COUNTY |
|-----|-----|-----|-------|-----|-------|----------------------|-------------|---------|
| 14N | 10E | 36 | 36 | 1 | 0.10 | 00 | RESIDENTIAL | CLATSOP |

| | | | | | | |
|-----|-----|----|-------|----|------------|--------------|
| 105 | 22E | 21 | SE NE | 04 | STOCKWATER | (31) CASSIA |
| 105 | 22E | 21 | SE NE | 43 | DOMESTIC | (31) CASSIA |

+ - - DIVERSION MEANS - WELL AND PUMP

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

+ - - OTHER RIGHTS FOR SAME USE - NONE

| | REMARKS |
|------------------------------|---------|
| P/U STARR'S FERRY PARK SUBD. | |

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

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

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

DEGREE DATE - +
00/00/0000
OCT 28 1994

CERTIFIED
NOV 15 1991
WATER EXAMINER