

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-580

RIGHT NUMBER: 45-10865

NAME & ADDRESS: JOETTA PATTERSON
GAYLIN K PATTERSON
RT 3 BOX 3559
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: 05/26/1972

POINT OF DIVERSION: T11S R24E S18 SWSWSW Within CASSIA 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 CASSIA County
T11S R24E S18 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. 11S24E186405



Claim proofread by: C. A.

Date: 9-22

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

RETURN SERVICE REQUESTED

DATA ENTRY DONE
REMAILED



3/12/98 AM
IMPORTANT WATER RIGHT INFORMATION

452 East 500 So.

RECEIVED
MAR 06 1998
Department of Water Resources

45-10865
JOETTA PATTERSON
GAYLIN K PATTERSON
RT 3 BOX 3559
BURLEY ID 83318

83318X9565 45318



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: A45-10865
Date Received: 5/26/1989
Receipt No: M003719
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: GAYLIN K. PATTERSON 208-678-2081
Address: RT. 3 BOX 3559
BURLEY, ID 83318

OR
Name: JOETTA PATTERSON 208-678-2081
Address: RT. 3 BOX 3559
BURLEY, ID 83318

2. Date of Priority: MAY 26, 1972

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	24E	18	SW	SW	SW		CASSIA

5. Description of diverting works:
WELL AND 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		

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

A45-10865

Page 1

Date: 05/26/89

MICROFILMED
MAR 08 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
11S	24E	18	SW SW		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:
B.I.D. WATER.

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 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. AYS-10865

Date Received 5-26-89

Receipt Number 1003719

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 *for Etta on*

1. Name of Claimant (s) Gayle K Patterson Phone (208) 678-2081

Mailing Address RT 3 Box 3559 Burley, Idaho Zip 83318

2. Date of Priority (Only one per claim) 5-26-89 Month/Day/Year

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

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 11S Range 24E

Section 18 SW 1/4 of SW 1/4 of SW 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. new well drilled in 1988 3/4 hour meter submersible pump

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

For _____ purposes from _____ Month/Day to _____ Month/Day amount 0.04 (cfs)

(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (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) 1 house

MICROFILMED

MAR 08 1993

10. Place of use is: Township: 11S Range 24E
Section 18 SW 1/4 of SW 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 County

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 ()

BLD water for irrigation if & when available

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) _____

no docket

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) X Gaylin K Peterson Date 5-26-89

Date _____

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

of _____, Title _____, 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 26th day of May 1989

SEAL

Notary Public Anna Baer

Residing at Boise Idaho

My Commission Expires 12/7 1994

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Notary

MICROFILMED

MAR 08 1993

