

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-38

RIGHT NUMBER: 45-10047

NAME & ADDRESS: CLYDE JOHNSON
3602 N 3900 E
HANSEN ID 83334

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 01/01/1968

POINT OF DIVERSION: T10S R19E S30 NW1/4 NW1/4 Within TWIN FALLS County

PURPOSE AND
PERIOD OF USE: PURPOSE OF USE *Home updated 1-8-98 EKC*
DOMESTIC 1 HOUSE PERIOD OF USE QUANTITY
01-01 12-31 0.04 CFS

PLACE OF USE: DOMESTIC Within TWIN FALLS County
T10S R19E S30 NW1/4

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. 10S19E306000

Claim proofread by: *[Signature]*

Date: SEP 25 1997



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

March 28, 1996

KARL J. DREHER
DIRECTOR

CLYDE JOHNSON
3602 N 3900 E
HANSEN ID 83334

Re: Snake River Basin Adjudication (SRBA)
Notice of Claim No. A45-10047
Change of Address

RECEIVED
APR 01 1996
Department of Water Resources
Southern Region

Dear Claimant,

IDWR has been notified the address presently in our claim records is incorrect. Although we have reached you at the address above, we need you to confirm this is your correct mailing address. Future notices related to your SRBA claim can be sent only to the address on your claim or as otherwise changed by you. The staff of this agency must avoid relying upon the word of others about your mailing address.

If the address above is correct, please sign your name at the bottom of this letter, and return it to this office. Otherwise, please make the proper corrections, sign, and return this letter. Thank you for your help. We hope to assure that you receive future notices about SRBA matters.

If the ownership of the property to which the water right(s) referenced above apply has changed, 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,

Adjudication Bureau Staff

SO:ss:region

#####

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

Claimant

MICROFILMED
DEC 03 1996

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT
OF THE STATE OF IDAHO IN AND FOR THE COUNTY OF TWIN FALLS

In Re Snake River Basin Adjudication Case)
No. 38-76)

Notice of Filing Director's Report and Supplemental
Director's Report Part II & III, United States' and Tribal
Non-consumptive Claims.

TO: ALL CLAIMANTS OF RIGHTS TO THE USE OF WATER IN THE SNAKE RIVER BASIN
YOU ARE HEREBY NOTIFIED OF THE FOLLOWING:

THE DIRECTOR'S REPORT PART II & III FOR THE UNITED STATES' AND TRIBAL NON-CONSUMPTIVE CLAIMS HAS BEEN FILED WITH
THE DISTRICT COURT. A SUPPLEMENTAL DIRECTOR'S REPORT PART II & III HAS ALSO BEEN FILED WITH THE DISTRICT COURT.
THIS NOTICE CONTAINS IMPORTANT INFORMATION ABOUT THE DIRECTOR'S REPORTS, AND DEADLINES AND FURTHER PRO-
CEEDINGS ON THESE WATER RIGHT CLAIMS.

IMPORTANT NOTICE REGARDING YOUR WATER RIGHT

THIS CONTAINS YOUR LEGAL NOTICE OF THE DIRECTOR'S REPORTS OF U.S. AND
TRIBAL NON-CONSUMPTIVE CLAIMS IN THE SNAKE RIVER BASIN ADJUDICATION
THESE CLAIMS COULD AFFECT YOUR WATER RIGHT

17731
Idaho Department of Water Resources
Statehouse Mail
Boise, Idaho 83720

Presorted
First Class Mail
U.S. Postage Paid
Boise, Idaho
Permit No. 1


REASON CHECKED 3602 N3900E
☐ Moved-Left No Address ☐ Refused
☐ Insufficient Address ☐ Vacant
☐ Moved-Not Forwardable ☐ No Such Street
☐ Forwarding Order Expired ☐ No Such No.
☐ Attempted-Not Known ☐ Unclaimed

RECEIVED
APR 20 1995

Department of Water Resources

CLYDE JOHNSON
RT 1 BOX 109
HANSEN ID 83334

RURAL ROUTE 1 does not exist
as a mailing address. To avoid
returned mail - please advise
correspondent of correct address

MICROFILMED

DEC 03 1996

A45-10047
JR



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-0000
Phone: (208) 327-7900 FAX: (208) 327-7866

RECEIVED

APR 11 1996

PHILIP E. BATT
GOVERNOR

March 28, 1996

KARL J. DREHER
DIRECTOR

RECEIVED
APR 16 1996
Department of Water Resources
Southern Region

CLYDE JOHNSON
3602 N 3900 E
HANSEN ID 83334

Re: Snake River Basin Adjudication (SRBA)
Notice of Claim No. A45-10047
Change of Address

A & R records Modified.

04-12-96 - ss

Dear Claimant,

IDWR has been notified the address presently in our claim records is incorrect. Although we have reached you at the address above, we need you to confirm this is your correct mailing address. Future notices related to your SRBA claim can be sent only to the address on your claim or as otherwise changed by you. The staff of this agency must avoid relying upon the word of others about your mailing address.

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Sincerely,

Adjudication Bureau Staff

SO:ss:region

#####

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

Clyde Johnson

Claimant

MICROFILMED

DEC 03 1996

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: A45-10047
Date Received: 10/24/1988
Receipt No: S003170
Received By: WJ

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CLYDE JOHNSON 208-423-4139
Address: RT 1 BOX 109
HANSEN, ID 83334

2. Date of Priority: JAN 01, 1968

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	19E	31	NW	NW	NW		TWIN FALLS

5. Description of diverting works:
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		

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

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	19E	31	NW	NW		DOMEST	

11. Place of use in counties: TWIN FALLS

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): Clyde Johnson Date: Oct 24 88
Date:

State of Idaho)
County of TF) SS.

Subscribed and sworn (or affirmed) before me this 24th day
of Oct 19 88 Lon White
Notary Public

Seal

Residing at TF
My Commission Expires 5/95

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

WATER RIGHT NUMBER - A45-10047

PREFIX TRANSLATION: ADJUDICATION CLAIM

CLO (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
JOHNSON

CLYDE

1 - RT 1 BOX 109

2 -

3 -

CITY- HANSEN

PHONE - 208-423-4139

STATE- ID ZIP- 83334

+ - - PRIORITY DATE - - +
01/01/1968

```

+ - - - 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) |
|-----|-----|-----|-------|-----|------|--------|--------------------|---------------------------------------|
| + | - | - | - | - | - | - | - | + |

10S 19E 31 NW NW NW (83) TWIN FALLS

| CODE | DESCRIPTION | PERIOD FROM | PERIOD TO | WATER USE | DIVERSION RATE | DIVERSION VOLUME |
|------|-------------|-------------|-----------|-----------|----------------|------------------|
| 1 | 1 | 1 | 1 | 1 | 1 | 1 |

43 - DOMESTIC

01/01

12/31

9.040

| + - TOTAL DIV. RATE - + | | + - TOTAL DIV. VOLUME - + | | + - TOTAL DIV. CAPACITY - + | | + - TOTAL CONSUMPTIVE USE - + | | + - KW USAGE - + | |
|-------------------------|--|---------------------------|--|-----------------------------|--|-------------------------------|--|------------------|--|
| 0.040 | | | | | | 0.0 | | | |

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

105

193

31

NW NW

43

DOMESTIC

(83) TWIN FALLS

+ - - DIVERSION MEANS - WELL & PUMP

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

+ - - OTHER RIGHTS FOR SAME USE - NONE

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

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

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

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - - AUDIT FIELDS - 10/24/88 WHITE 10/17/89 REFUNDML

MICROFILMED
00/00/0000
OCT 27 1994

CERTIFIED
DEC 28 1991
WATER EXAMINER