

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-63

RIGHT NUMBER:

45-10079

NAME & ADDRESS:

CLARENCE HOLLIFIELD  
HELEN HOLLIFIELD  
RT 1 22866  
HANSEN ID 83334

SOURCE:

GROUNDWATER

QUANTITY:

0.06 CFS

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

PRIORITY DATE:

12/31/1923

POINT OF DIVERSION:

T10S R19E S30

NENENE

Within TWIN FALLS County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE  
DOMESTIC 2 HOMES

PERIOD OF USE  
01-01 12-31

QUANTITY  
0.06 CFS

PLACE OF USE:

DOMESTIC  
T10S R19E S30

Within TWIN FALLS County  
NENE

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. 10S19E300000

Claim proofread by: CJA

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: A45-10079  
Date Received: 11/28/1988  
Receipt No: S004040  
Received By: aw

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name: CLARENCE HOLLIFIELD 208-423-4180  
Address: RT 1, 22866  
HANSEN, ID 83334

AND/OR

Name: HELEN HOLLIFIELD 208-423-4180  
Address: RT 1, 22866  
HANSEN, ID 83334

2. Date of Priority: DEC 31, 1923

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 of | Lot | County     |
|----------|-------|---------|--------|--------|--------|-----|------------|
| 10S      | 19E   | 30      | NE     | NE     | NE     |     | 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 | 0.060  |      |        |

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/2 HOUSES

10. Place of Use:

| Township | Range | Section | 1/4 of 1/4 | Lot | Use    | Acres |
|----------|-------|---------|------------|-----|--------|-------|
| 10S      | 19E   | 30      | NE NE      |     | 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): \_\_\_\_\_ 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

CIVIL CASE NUMBER: 39576

IN RE THE GENERAL ADJUDICATION  
OF RIGHTS TO THE USE OF WATER FROM  
THE SNAKE RIVER BASIN WATER SYSTEM

Identification No. 44510079  
Date Received Nov 28-1988  
Receipt Number 5004040

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

1. Name of Claimant (s) +/or Helen Clarence W. Hollifield Phone (208) 423-4180Mailing Address Rt 1-22866 Hansen, Ida 83334 Zip 833342. Date of Priority (Only one per claim) 12/31/1923 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other ( ) (a) \_\_\_\_\_  
Name or kind of source

which is tributary to (b) \_\_\_\_\_

4. Location of point of diversion is: Township 10 Range 19Section 30, Ne 1/4 of Ne 1/4 of Ne 1/4, Govt. Lot \_\_\_\_\_, BM.,County of Twin Falls

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 + pump

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

For Dom purposes from 1/1 to 12/31 amount .06 (cfs)  
(Both dates are inclusive)

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

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) 0/2 houses

MICROFILMED

MAR 08 1993

10. Place of use is: Township: 10<sup>th</sup> Range 19<sup>th</sup>

Section 30, Ne 1/4 of Ne 1/4, Govt. Lot \_\_\_\_\_, B.M.,

County of TF 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? TF

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.

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)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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 do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Helen B Hallfield Date Nov 28/88

\_\_\_\_\_ 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 Helen B Date \_\_\_\_\_

Title and Organization \_\_\_\_\_

State of Idaho/or \_\_\_\_\_ }  
County of \_\_\_\_\_ } SS.

Subscribed and sworn (or affirmed) before me this 28<sup>th</sup> day of Nov 19 88

SEAL

Notary Public Don White

Residing at TF

My Commission Expires 5/95

Last Name \_\_\_\_\_ Ident No. \_\_\_\_\_

Copies: White-State, Yellow-Claimant

NOT RECORDED  
MAR 08 1993



