

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-343

RIGHT NUMBER: 45-10537

NAME & ADDRESS: CLIFFORD H DARRINGTON
11A DARRINGTON
RT 1 BOX 116
DECLO ID 83323

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 12/31/1925

POINT OF DIVERSION: T10S R24E S34 SESESE

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE
STOCKWATER
DOMESTIC 1 HOME

PERIOD OF USE

05-01 10-31

01-01 12-31

QUANTITY

0.02 CFS

0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T10S R24E S34 SESE

Place of use for STOCKWATER is same as DOMESTIC

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. 10S24E347600

STOCKWATER, 10 BEEF

Claim proofread by: CN

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: A45-10537
Date Received: 5/16/1989
Receipt No: S007127
Received By: SEC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CLIFFORD H. DARRINGTON 208-654-2793
Address: RT. 1 BOX 116
DECLO, ID 83323

OR
Name: ILA DARRINGTON 208-654-2793
Address: RT. 1 BOX 116
DECLO, ID 83323

2. Date of Priority: DEC 31, 1925

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	24E	34	SE	SE	SE		CASSIA

5. Description of diverting works:
6"X 60' WELL, HAND 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	05/01	10/31	0.020		

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 S/10 BEEF

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	24E	34	SE	SE		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:
NONE

14. Remarks:
IRRIGATION WATER--B.I.D.

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. A45-10537
Date Received 5-15-89
Receipt Number 5007127 *gcu*NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

MAY 16 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) Clifford H. Darrington or ILA Phone () 654 2793Mailing Address Rt. 1, Box 116 Declo, ID. Zip 833232. Date of Priority (Only one per claim) 12/31/1925 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 10S Range 24ESection 34, SE 1/4 of SE 1/4 of SE 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" x 60' approx. with hand pump.

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

	Month/Day	to	Month/Day	(cfs)
For <u>Domestic</u> purposes from	<u>1/1</u>	to	<u>12/31</u>	amount <u>.04</u>
(Both dates are inclusive)				
For <u>Stock</u> purposes from	<u>5/1</u>	to	<u>10/31</u>	amount <u>.02</u>

7. Total quantity claimed .04 (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) 2/1 House 9/10 Beef.

MICROFILMED

MAR 18 1989

10. Place of use is: Township: 10 S Range 24 E

Section 34, SE 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 (X)

14. Remarks: Irrig. Water - Burley Irr. Dist

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 _____

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 Clifford H. Darrington Date X May 15, 1989

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 _____ Organization _____ of _____

and that the statements contained in the foregoing document are true and correct. Title _____ Organization _____

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 15th day of May 19 89

SEAL

Notary Public Robert W. Warstell

Residing at Twin Falls, Idaho

My Commission Expires 1/16/1995

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

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

May 23, 1989

No. A45-10537

A45-10538

Clifford H. &/or Ila Darrington
Rt. 1 Box 116
Declo, ID 83323

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,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 08 1993

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

09/07/91 10:18:30
PAGE 1

OLD (D) NUMBER -

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

STATE- ID ZIP- 63323

STATE- ID ZIP- 83323

PHONE - 208-654-2793

ILA

+ - - - STATUS - - - - +

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

[illegible]

10S 24E 34 SE SE SE (31) CASSIA

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

43 - DOMESTIC
04 - STOCKWATER

01/01	12/31
05/01	10/31

0.040
0.020

+ - 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
14	1	36	1	1	1.00	1	1.00	1

10S 24E 34 SE SE

43 DOMESTIC

(31) CASSIA

+ - - DIVERSION MEANS - 6"X 60' WELL, HAND PUMP

+ - - NON-IRRIGATION USE - 0/1 HOUSE S/10 BEEF

+ - - OTHER RIGHTS FOR SAME USE - NONE

		REMARKS
	IRRIGATION WATER--B.I.D.	

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

MICROFILMED
OCT 28 1994

09/07/91 10:18:30
PAGE 2

PROOF
SEP 16 1991