

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-703

RIGHT NUMBER: 45-11038

NAME & ADDRESS: DEWANE L SANDLIAN
CAROL JUNE SANDLIAN
1600 MONROE AVE
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: 04/15/1965

POINT OF DIVERSION: T10S R22E S25 NWNE 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
T10S R22E S25 NWNE

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. 00013001001C

Claim proofread by:

Date:

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: A45-11038
Date Received: 6/02/1989
Receipt No: S007476
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CAROL JUNE SANDLIAN 208-678-8034
Address: 1600 MONROE AVE.
BURLEY, ID 83318
AND/OR
Name: DEWANE L. SANDLIAN 208-678-8034
Address: 1600 MONROE AVE.
BURLEY, ID 83318
2. Date of Priority: APR 15, 1965
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	22E	25	NW	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		
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 & LAWN

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	22E	25	NW	NE		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:

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. A45-11038

Date Received

Receipt Number 5007476 *see*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) Dewane L. Sandlian & Carol June Sandlian *Indon* Phone (208) 678-8043 (home)
678-5411 (work)Mailing Address 1600 Monroe Ave., Burley, Idaho Zip 833182. Date of Priority (Only one per claim) 4-15-1965 Month/Day/Year3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township Ten (10) South Range Twenty Two (22) E.B.M.Section 25, NW 1/4 of NE 1/4 of _____ 1/4, Govt. Lot _____, BM.,County of Cassia (see Schedule "A" attached)Additional points of diversion if any: none5. 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 Domestic purposes from 1-1 ^{Month/Day} to 12-31 ^{Month/Day} amount .04 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

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) one household and surrounding yard

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MAR 08 1993

10. Place of use is: Township: Ten (10) South Range Twenty Two (22) E.B.M.

Section 25, NW 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 none

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 ()

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)

Number of Attachments one (1)

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) Dewane L. Sandrian Date 6-2-89
Carol Jude Sandrian Date 6-2-89

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 Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 2nd day of June 19 89

SEAL

Notary Public Steve Coo

Residing at Twin Falls

My Commission Expires Dec 7, 1994

Last Name _____ Ident No. A45-11038

Copies: White-State, Yellow-Claimant

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SCHEDULE "A"

A part of Tract No. 1 of the Riverview Acreage, Cassia County, Idaho, as the same is platted in the official plat thereof, now of record in the office of the Recorder of said County, and located in the NW $\frac{1}{4}$ NE $\frac{1}{4}$ of Section 25, Township 10 South, Range 22 East of the Boise Meridian, described as follows:

Beginning at the Northeast corner of said Tract 1, which point shall be known as the True Point of Beginning;
Thence West along the North boundary of said Tract 1 for a distance of 126.37 feet;
Thence Southerly for a distance of 119.25 feet to a point 128.67 feet West of the East boundary of said Tract 1;
Thence East parallel to the North boundary of said Tract 1 for a distance of 128.67 feet to a point on the East boundary of said Tract 1;
Thence North along the East boundary 119.50 feet to the True Point of Beginning.

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