

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-906

RIGHT NUMBER: 45-11314

NAME & ADDRESS: JOHN F ALMANZA
1658 OAKLEY 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: 01/01/1950

POINT OF DIVERSION: T10S R24E S11 SWSW 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 R24E S11 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. 10S24E114000

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: A45-11314
Date Received: 6/21/1989
Receipt No: S007782
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOHN F. ALMANZA 208-678-8803
Address: 1658 OAKLEY AVE.
BURLEY, ID 83318

2. Date of Priority: JAN 01, 1950

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	11	SW	SW	SW		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

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
10S	24E	11	SW	SW		DOMEST	

11. Place of use in counties: CASSIA

A45-11314

Page 1

Date: 06/21/89

MICROFILMED

MAR 09 1993

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 SYSTEMIdentification No. A45-11314
Date Received _____
Receipt Number 5007782 *Sec*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) John F. Almanza Phone (208) 678-8803Mailing Address 1658 Oakley Ave Burley Zip 833182. Date of Priority (Only one per claim) 1950-Jan 1 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____

which is tributary to (b) _____ Name or kind of source

4. Location of point of diversion is: Township 10 South Range 24 EastSection 11 S/W 1/4 of S/W 1/4 of S/W 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. 4 inch well

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 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 - Domestic

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RECEIVED

JUN 8 1989

Department of Water Resources
Southern Region Office

10. Place of use is: Township: 10 South Range 24 East
Section 11, 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

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.

Burley Irrigation fee paid yearly but has not used

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) John Almanza Date 6-5-89

Helen A. Almanza Date 6-5-89

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 Cassia) SS.

Subscribed and sworn (or affirmed) before me this 5th day of June 1989

SEAL

Notary for
Helen A.
Almanza

Notary Public Mary H. Burdick

Residing at Burley, Idaho

My Commission Expires 5-25-90

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MAR 09 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

Aug. 11, 1989

Re: A45-11314

JOHN F ALMANZA
1658 OAKLEY AVE
BURLEY ID 83318

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 09 1993

WATER RIGHT NUMBER - A45-11314

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
ALMANZA

JOHN F.

1 - 1658 OAKLEY AVE.
2 -
3 -
CITY- BURLEY
PHONE - 208-678-8803

STATE- ID ZIP- 83318

+ - - PRIORITY DATE - - +
01/01/1950

+ - - - REGION - - - +
17 SOUTHERN

+ - - - STAGE - - - +
J - BENEFICIAL USE

+ - - - STATUS - - - - +

+ - - - - SOURCE - - - - - +
GROUNDWATER

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

[illegible]

10S 24E 11 SW SW SW (31) CASSIA

[illegible]

| | | | |
|---------------|-------|-------|-------|
| 43 - DOMESTIC | 01/01 | 12/31 | 0.040 |
|---------------|-------|-------|-------|

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

[illegible]

| | | | | | | |
|-----|-----|----|-------|----|----------|--------------|
| 10S | 24E | 11 | SW SW | 43 | DOMESTIC | (31) CASSIA |
|-----|-----|----|-------|----|----------|--------------|

+ - - DIVERSION MEANS - WELL AND 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 - - - +

+ - DECREE DATE - +
00/00/2000
UNRECORDED MED

+ - - AUDIT FIELDS - 06/21/89 CLELLAND

MICROFILMED
OCT 26 1994

WATER RIGHT NUMBER - A45-11314

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - - COMMENTS - - - - - +
NO COMMENTS FOUND

+ - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +

| | | | | | | | | |
|-----------------------|---|------------|-----------------------|---|------------|-------------------------|---|-------|
| COURT REPORT FILING | - | 00/00/0000 | FIELD INSPECTION MADE | - | 00/00/0000 | CIVIL CASE NUMBER | - | 39576 |
| OBJECTION FILED DATE | - | 00/00/0000 | FIELD INSPECTION FLAG | - | | OLD CASE NUMBER | - | |
| RESPONSE FILED DATE | - | 00/00/0000 | VERIFIED DATE | - | 00/00/0000 | OLD JUDICIAL DISTRICT | - | |
| CLAIM RECEIVED DATE | - | 06/09/1989 | LAST AMENDED DATE | - | 00/00/0000 | TEMPORARY RIGHT | - | P |
| PROOF DUE DATE | - | 00/00/0000 | PROOF MADE DATE | - | 00/00/0000 | WATER DISTRICT | - | |
| LICENSED DATE | - | 00/00/0000 | RECEIPT NUMBER | - | S007782 | FEDERAL/STATE INDICATOR | - | S |
| CLAIMS TAPE ERROR FLG | - | | POU OWNERSHIP FLAG | - | Y | PRESUMPTION FLAG | - | |
| FEE EXEMPT FLAG | - | | NAME CONNECTOR | - | | NOTICE OF ERROR FLAG | - | |

10524E114000

DATA ENTRY
ENTERED 11/13/93
CHECKED 2/6/94

"Verified By"
Topo Map/Ortho-PQ
ASCS Map
Watermaster Records
NAPP Photos
Field Exam
Other (See Remarks)
County Records
Witness Statement
Project Records
IDWR Records

VERIFIED
NOV 10 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER

PROOF
SEP 17 1991