

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	NED F BOWEN	07/15/1909	STOCKWATER DOMESTIC	01-01 12-31 01-01 12-31	0.03 CFS 0.04 CFS	
TOTAL DIVERSION:					0.07 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T11S R24E S09 NWNWSW

CASSIA County

Place of use Legal Description for: STOCKWATER

NE				NW				SW				SE																			
NENE		NWNE		SWNE		SENE		NENW		NWNW		SWNW		SENW		NESW		NWSW		SWSW		SESW		NESE		NWSE		SWSE		SESE	
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	
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11S	24E	9	:		:		:		:		:		:		:		:		:		:		:		:		:		:		

Place of use Legal Description for: DOMESTIC

NE				NW				SW				SE																			
NENE		NWNE		SWNE		SENE		NENW		NWNW		SWNW		SENW		NESW		NWSW		SWSW		SESW		NESE		NWSE		SWSE		SESE	
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	
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11S	24E	9	:		:		:		:		:		:		:		:		:		:		:		:		:		:		

POU County: CASSIA

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

OK

2/4/98

Remarks: EXP STOCKWATER, 100 HEAD
PARCEL NO. RP T11SR24E094800

Dates: Exam Made Date: Verified Date: 10/17/1997 Objection Filed Date:

Misc: Water District Number: Field Inspection Flag:
Presumption Flag:

AJ0749NP
No. R45-11349

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 10/17/97
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	NED F BOWEN 645 S 450 E PO BOX 266 BURLEY ID 83318 (208) 678-5029	07/15/1909	STOCKWATER DOMESTIC	01-01 12-31 01-01 12-31	0.03 CFS 0.04 CFS	
TOTAL DIVERSION:					0.07 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T11S R24E S09 NWNWSW

CASSIA County

Place of use Legal Description for: STOCKWATER

NE												SW												SE																																											
				NENE				NWNE				SWNE				SENE				NENW				NWNW				SWNW				SESW				NESW				NWSW				SWSW				SESW				NESE				NWSE				SWSE				SESE			
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:																						
11S	24E	9	:													:									:																				:																						

Place of use Legal Description for: DOMESTIC

NE												SW												SE																																											
				NENE				NWNE				SWNE				SENE				NENW				NWNW				SWNW				SESW				NESW				NWSW				SWSW				SESW				NESE				NWSE				SWSE				SESE			
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:																						
11S	24E	9	:													:								:																					:																						

POU County: CASSIA

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP STOCKWATER, 100 HEAD
PARCEL NO. RP T11SR24E094800

Dates: Exam Made Date: Verified Date: 10/17/1997 Objection Filed Date:

Misc: Water District Number: Field Inspection Flag:
Presumption Flag:

AJ0749NP
No. R45-11349

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 10/17/97
PAGE: 2

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Comments: Date: 10/09/1997 User-ID: SSHERMAN Subject: COPIED FROM REMARKS
DWR NOTE

P/D DESCRIPTION AS GIVEN ON ORIGINAL IS INCORRECT. BASED ON
THE ATTACHMENTS INCLUDED THE CORRECT INFORMATION IS LISTED IN
THIS CLAIM.

Date: 10/10/1997 User-ID: SSHERMAN Subject: ADDRESS ADDITION
ADDED GRID ADDRESS ON 10/09/1997.

Audit: 10/17/97 SSHERMAN

AJ5856NP

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

DATE: AUG-20-1997

PAGE: A-169

RIGHT NUMBER: 45-11349

NAME & ADDRESS: NED F BOWEN
PO BOX 266 645 S, 450 E.
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.07 CFS

PRIORITY DATE: 07/15/1909

POINT OF DIVERSION: RP T11S R24E S09 4800 NWNWSW

Within CASSIA County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.03 CFS
	DOMESTIC D/1 HOUSE S/100	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T11S R24E S09 NWSW

DOMESTIC Within CASSIA County
T11S R24E S09 NWSW

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

DWR NOTE

P/D DESCRIPTION AS GIVEN ON ORIGINAL IS INCORRECT. BASED ON
THE ATTACHMENTS INCLUDED THE CORRECT INFORMATION IS LISTED IN
THIS CLAIM.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Verified by Date: 09-09-97

Verification Source: C. R.

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: A45-11349
Date Received: 6/22/1989
Receipt No: S007832
Received By: SC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: NED F. BOWEN 208-678-5029
Address: P.O. BOX 266
BURLEY, ID 83318

2. Date of Priority: JUL 15, 1909

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	24E	9	NW	NW	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		
STOCKWATER	01/01	12/31	0.030		

7. Total Quantity Appropriated is:
0.070 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/100

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
11S	24E	9	NW	SW		DOMEST	
			NW	SW		STOCK	

A45-11349

Page 1

Date: 06/22/89

MICROFILMED

MAR 09 1993

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:

DWR NOTE

P/D DESCRIPTION AS GIVEN ON ORIGINAL IS INCORRECT. BASED ON
THE ATTACHMENTS INCLUDED THE CORRECT INFORMATION IS LISTED IN
THIS CLAIM.

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 _____

NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ Lot 2

30-11-24 House

NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$

9-11-24

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MAR 09 1993

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. A45-11349
Date Received _____
Receipt Number 5007832 SCNOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE
For Domestic and/or Stockwater
Where Daily Use is less than 13,000 gpm

Filing Fee \$25

RECEIVED

MAR 2 1989

Department of Water Resources
Twin Falls Region OfficeIncorrect
Legals11S. 24E.
Sec. 9

Please type or print clearly

1. Name of Claimant (s) Ned F. Bowen Phone () 678-5029Mailing Address P.O. Box 266 Burley Idaho Zip 833182. Date of Priority (Only one per claim) July 15, 1909 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 9S Range # 24ESection 11, NW 1/4 of NW 1/4 of SW 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" casing

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 0.03 (cfs)For Livestock purposes from 1/1 (Both dates are inclusive) to 12/31 amount 0.037. Total quantity claimed 0.07 (cfs)8. Total consumptive use claimed is de minimus

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MAR 09 1993

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 75-100 head beef one house

10. Place of use is: Township: 95 Range 24E
Section 11, NW 1/4 of 5W 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 County

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: _____

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 0

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 (X)

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Neil F. Bowler Date June 1-1989

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 _____ Date _____

Title and Organization _____

State of Idaho/or _____ } SS. 518-10-5814

County of Cassia } _____

Subscribed and sworn (or affirmed) before me this 1 day of June 19 89

SEAL

Notary Public Bruce W. Schly

Residing at Brice Idaho

My Commission Expires 4/11/95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 09 1993

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T 1007

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MAR 0 9



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

.Sept. 8, 1989

Re: A45-11349
A45-11350

.NED F BOWEN
.P O BOX 266
.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,

A handwritten signature in black ink, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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MAR 09 1993