

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: A45-11468
Date Received: 6/22/1989
Receipt No: S007977
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MARY E. SEDAM 208-678-5118
Address: P.O. BOX 477
BURLEY, ID 83318
OR
Name: T. JUDSON SEDAM 208-678-5118
Address: P.O. BOX 477
BURLEY, ID 83318

2. Date of Priority: JUN 30, 1976

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	23E	29	NW	NE	SW		CASSIA

5. Description of diverting works:
WELL AND 3/4 HP JET 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

A45-11468

Page 1

Date: 06/22/89

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	23E	29	NE	SW		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:
CITY OF BURLEY WATER

14. Remarks:
LOT 14, BLK. 2, SOUTHWEST CITY OF BURLEY.

15. Basis of Claim: BENEFICIAL USE

RECEIVED

AUG 22 1989

Department of Water Resources
Southern Region Office

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): Mary E. Sedam Date: _____

M. Sedam Date: 8-21-89

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this 21st day

of August 19 89

[Signature]
Notary Public

Seal

Residing at [Signature]

My Commission Expires 6-9-95

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AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1030

RIGHT NUMBER: 45-11468

NAME & ADDRESS: MARY E SEDAM
T JUDSON SEDAM
PO BOX 477
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: 06/30/1976

POINT OF DIVERSION: T10S R23E S29 NWNESE 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 R23E S29 NESW

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. BSW010020140

[Handwritten signature]

Claim proofread by: *EN*
 9-29

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. A45-11468

Date Received _____

Receipt Number _____

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JUN 1 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) Mary E. Sedam T. Judson Sedam Phone (208) 678 5118Mailing Address P.O. Box 477 Burley Id Zip 833182. Date of Priority (Only one per claim): June 1976 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 23ESection 29 NW 1/4 of NE 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. 65' Cased Well w/ 3/4 Horse Jet 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 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 minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 1 House 1 House

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10. Place of use is: Township: 105 Range 23E
Section 29, NE 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 City water used for home.
14. Remarks: Burley City Southwest Lot 14 B/K2

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) Mary E. Sedam Date May 31 1989

Jason Sedam Date May 31 1989

For Organizations: I do solemnly swear or affirm that I am _____ Title _____

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 31st day of May 1989

SEAL

Notary Public [Signature]

Residing at Burley Id. 83318

My Commission Expires _____

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MY COMMISSION EXPIRES
MAY 15, 1993

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T. J. SEDAM
BOX 477
BURLEY, ID. 83318



Department of Water Resources
2148 4th Ave East
Twin Falls Id 83301

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State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

A. KEITH HIGGINSON
Director

Aug. 15, 1989

Re: A45-11468

MARY E SEDAM
P O BOX 477
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:

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MAR 10 1993

