

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1048

RIGHT NUMBER: 45-11488

NAME & ADDRESS: PAMELA M SIMCOE
MICHAEL L SIMCOE
RT 1 BOX 1682
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: 05/01/1948

POINT OF DIVERSION: T10S R24E S27 SESEW 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 S27 SESW

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. 10S24E276700

Claim proofread by:

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: A45-11488
Date Received: 7/03/1989
Receipt No: S007997
Received By: lw

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MICHAEL L. SIMCOE 208-654-2129
Address: RT 1 BOX 1682
BURLEY, ID 83318

AND/OR
Name: PAMELA M. SIMCOE 208-654-2129
Address: RT 1 BOX 1682
BURLEY, ID 83318

2. Date of Priority: MAY 01, 1948

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	27	SE	SE	SW		CASSIA

5. Description of diverting works:
WELL & 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	Lot	Use	Acres
10S	24E	27	SE	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:
B.I.D. WATER USED FOR LAWN

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. AK-11488

Date Received _____

Receipt Number _____

RECEIVED NOTICE OF CLAIM

JUN 5 1989

TO A

WATER RIGHT

Department of Water Resources
Southern Region Office

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) MICHAEL L OR PAMELA M SIMCOE Phone (208) 654-2129Mailing Address RT 1 Box 1682 BURLEY ID Zip 833182. Date of Priority (Only one per claim) 05/01/48 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 10 Range 24Section 27, SE 1/4 of SE 1/4 of SW 1/4, Govt. Lot _____, BM.,

County of _____

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. Pump

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

For Domestic purposes from 01/01 to 12/31 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

MICROFILMED

MAR 10 1989

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

Section 27, SE 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 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 ~~is~~

IRRIGATE LAWN WITH BURLEY IRRIGATION DISTRICT

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 _____

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

Signature of Claimant (s) Pamela M. Linnick Date 5-17-89

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 _____)

County of MINIDOKA) SS.

Subscribed and sworn (or affirmed) before me this 17th day of MAY 19 89

SEAL

Notary Public Don Allen

Residing at RUPERT, IDAHO

My Commission Expires 8-11-91

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 10 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. 9, 1989

Re: A45-11488

MICHAEL L SIMCOE
RT 1 BOX 1682
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 dark ink, appearing to read 'Judy Givens', with a stylized flourish at the end.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 10 1993

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

RETURN SERVICE REQUESTED

DATA ENTRY DONE
REMAILED

IMPORTANT WATER RIGHT INFORMATION

45-11488

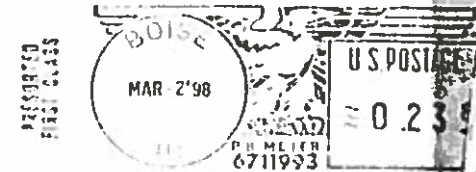
PAMELA M SIMCOE
MICHAEL L SIMCOE
RT 1 BOX 1682
BURLEY ID 83318

NOT DEFERRED
UNABLE TO FORWARD
RETURN TO SENDER

3/12/98 am

798 E Hwy 81

RECEIVED
MAR 10 1998
Department of Water Resources



8331854

WATER RIGHT NUMBER - A45-11488

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
SIMCOE

PAMELA M.

1 - RT 1 BOX 1682

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-654-2129

SIMCOE

MICHAEL L.

1 - RT 1 BOX 1682

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-654-2129

+ - - PRIORITY DATE - - +
05/01/1948

+ - - - REGION - - - +
17 SOUTHERN

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

+ - - - STATUS - - - - +

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

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

TWN	RNG	SEC	TRACT	LOT	RFLG	COUNTY	POINT OF DIVERSION	STREAM INDEX (BLANK IF NO INDEX CODE)
06	07	08	09	10	11	12	13	14

10S 24E 27 SE SE SW (31) CASSIA

CODE	DESCRIPTION	PERIOD FROM	PERIOD TO	DIVERSION RATE	DIVERSION VOLUME
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	

TWN	RNG	SEC	TRACT	LOT	ACRES	PLACE OF USE CODE	DESCRIPTION	COUNTY
10S	24E	27	SE SW			43	DOMESTIC	(31) CASSIA

+ - - DIVERSION MEANS - WELL & PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE

+ - - OTHER RIGHTS FOR SAME USE - B.I.O. WATER USED FOR LAWN

REMARKS
NO REMARKS FOUND.

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

+ - - - - - CONDITIONS OF APPROVAL - - - - - +
NO CONDITIONS OF APPROVAL FOUND. MICROFILMED

MICROFIL MED

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - DECREE DATE - +
00/00/0000

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

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	- 06/12/1989	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	- S007997	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	- AND/OR	NOTICE OF ERROR FLAG	-

PROOF
SEP 17 1991

ENTERED 1-20-92
CHECKED 2/10/92

VERIFIED
NOV 11 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER