

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1074

RIGHT NUMBER: 45-11521

NAME & ADDRESS: MARY ANN MANION
LAWRENCE D MANION
RT 3 BOX 3140
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.06 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 10/10/1971

POINT OF DIVERSION: T11S R23E S03 SWNWNE Within CASSIA County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.02 CFS
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T11S R23E S03 NWNE

DOMESTIC Within CASSIA County
T11S R23E S03 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. 000070010070
STOCKWATER, 2 HORSES, 15 SHEEP

Claim proofread by: CA

Date: 9-29

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: A45-11521
Date Received: 6/30/1989
Receipt No: S008010
Received By: lw

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: MARY ANN MANION 208-678-3488
Address: RT 3 BOX 3140
BURLEY, ID 83318

AND/OR
Name: LAWRENCE D. MANION 208-678-3488
Address: RT 3 BOX 3140
BURLEY, ID 83318

2. Date of Priority: OCT 10, 1971

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	23E	3	SW	NW	NE		CASSIA

5. Description of diverting works:
6" CASED WELL, 1HP 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	0.020		

7. Total Quantity Appropriated is:
0.060 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOME, S/2 HORSES, 1-15 SHEEP

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
11S	23E	3	NW NE		STOCK 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:
E-Z ACRES SUBD., LT 7, BLK 1.

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

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 445-11521

Date Received _____

Receipt Number _____

RECEIVED
NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 6 1989

ACQUIRED UNDER STATE LAW

Department of Water Resources For Domestic and/or Stockwater Purposes
Southern Region Office Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Lawrence D. and/or Mary Ann Manion Phone (208) 678-3488

Mailing Address Route 3, Box 3140 Burley, Idaho Zip 83318

2. Date of Priority (Only one per claim) October 10, 1971 Month/Day/Year

3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____

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

4. Location of point of diversion is: Township 11 South Range 23 East

Section 3 , SW 1/4 of NW 1/4 of NE 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. Well 6" Casing 1 H.P. Pump

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

For Domestic purposes from January 1st to December 31st amount 0.04 (cfs)

For Stock purposes from January 1st to December 31st amount 0.02 (Both dates are inclusive)

7. Total quantity claimed 0.06 (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 Home, 1 or 2 horses, Sheep - Number varies up to 15.

MICROFILMED

MAR 10 1993

10. Place of use is: Township: 11 South Range 23 East
Section 3, 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 _____

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. None (X)

14. Remarks: E-Z Acres Subdivision Lot 7 in Block 1

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 None

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) Mary Ann Manion Date June 1, 1989
_____ Date _____

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

of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
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 1st day of June 19 89

SEAL

Notary Public Mary H. Burdick
Residing at Burley, Idaho
My Commission Expires 5-25-95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED
MAR 10 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2146 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

A. KEITH HIGGINSON
Director

Aug. 15, 1989

Re:A45-11521

MARY ANN MANION
RT 3 BOX 3140
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 cursive script, appearing to read "Judy Givens".

Judy Givens
Adjudication Secretary

/jg

Enclosures:

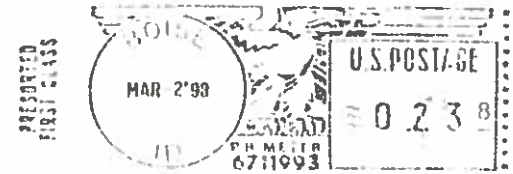
MICROFILMED

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



3/12/98 dm
IMPORTANT WATER RIGHT INFORMATION

209 East 212 South

45-11521

MARY ANN MANION
LAWRENCE D MANION
RT 3 BOX 3140
BURLEY ID 83318

RECEIVED

MAR 06 1998

Department of Water Resources

83318-9515



OLD (D) NUMBER -

44-261894

WATER RIGHT NUMBER - A45-11521

PREFIX TRANSLATION: ADJUDICATION CLAIM

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

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 06/30/89 WHITE

+-----COMMENTS-----+

NO COMMENTS FOUND

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

COURT REPORT FILING	-	00/00/0000
OBJECTION FILED DATE	-	00/00/0000
RESPONSE FILED DATE	-	00/00/0000
CLAIM RECEIVED DATE	-	06/12/1989
PROOF DUE DATE	-	00/00/0000
LICENSED DATE	-	00/00/0000
CLAIMS TAPE ERROR FLG	-	
FEE EXEMPT FLAG	-	

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FIELD INSPECTION MADE      - 00/00/0000
FIELD INSPECTION FLAG      -
VERIFIED DATE              - 00/00/0000
LAST AMENDED DATE         - 00/00/0000
PROOF MADE DATE           - 00/00/0000
RECEIPT NUMBER            - S008010
POU OWNERSHIP FLAG        - Y
NAME CONNECTOR            - AND/OR

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CIVIL CASE NUMBER	-	39576
OLD CASE NUMBER	-	
OLD JUDICIAL DISTRICT	-	
TEMPORARY RIGHT	-	P
WATER DISTRICT	-	
FEDERAL/STATE INDICATOR	-	S
PRESUMPTION FLAG	-	
NOTICE OF ERROR FLAG	-	

000070010070

DATA ENTRY

ENTERED 1-20-93
CHECKED 2/4/93

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

VERIFIED
NOV 12 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 29 1991
WATER EXAMINER