

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1167

RIGHT NUMBER: 45-11644

NAME & ADDRESS: JACK FUNK
BONNIE FUNK
RT 3 BOX 3738
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: 03/01/1962

POINT OF DIVERSION: T11S R23E S09 NENE 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 S09	NENE
	DOMESTIC	Within CASSIA County
	T11S R23E S09	NENE

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. 11S23E090000
STOCKWATER, 8 HORSES

Claim proofread by: CN

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: A45-11644
Date Received: 6/22/1989
Receipt No: S008139
Received By: SLC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JACK FUNK 208-678-7985
Address: RT. 3 BOX 3738
BURLEY, ID 83318

OR
Name: BONNIE FUNK 208-678-7985
Address: RT. 3 BOX 3738
BURLEY, ID 83318

2. Date of Priority: MAR 01, 1962

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	23E	9	NE	NE			CASSIA

5. Description of diverting works:
6"X 75' WELL, 3/4 HP SUBM. 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 HOUSE S/8 HORSES

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	23E	9	NE	NE		DOMEST	
			NE	NE		STOCK	

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:

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. A45-11644

Date Received _____

Receipt Number _____

RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 08 1989

Department of Water Resources
Southern Region OfficeACQUIRED 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) Jack & Bonnie Funk Phone (208) 678-7985Mailing Address Route # 3 Box 3738 Burley, ID Zip 833812. Date of Priority (Only one per claim) 1962 March 1 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 11 Range 23Section 9, NE 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.

Six inch casing - seventy five ft deep
3/4 submersible pump & 3/4 pipe to house & corral

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)For Stockwater purposes from 1-1 (Both dates are inclusive) to 12-31 amount 0.027. Total quantity claimed 0.06 (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) 2 people (1 household) & head of horse

MICROFILMED

MAR 09 1993

10. Place of use is: Township: 11 Range 23 EBM
Section 9 NE2 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 (✓)

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 _____

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)

X Bonnie Funk
X Jack Funk

Date

6/7/89

Date

6/7/89

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

~~Jack & Bonnie Funk~~

Date

~~June 7 89~~

Title and Organization _____

State of Idaho _____)

County of Cassia)

SS.

Subscribed and sworn (or affirmed) before me this 7th day of June 19 89



Notary Public

Jackie Knopp

Residing at

Burley

My Commission Expires

1-1-92

Last Name _____

Ident No. _____

Copies: White-State, Yellow-Claimant



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. 15, 1989

Re: A45-11644

JACK FUNK
RT 3 BOX 3738
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

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

RETURN SERVICE REQUESTED

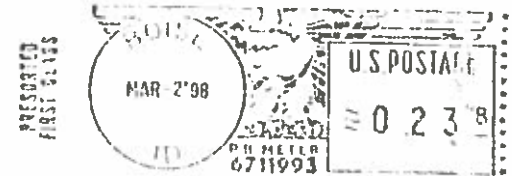
DATA ENTRY DONE
REMOVED

3/11/98 AM

IMPORTANT WATER RIGHT INFORMATION

143 East 300 South

45-11644
JACK FUNK
BONNIE FUNK
RT 3 BOX 3738
BURLEY ID 83318



RECEIVED

MAR 06 1998

Department of Water Resources

52318+3738



IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

WATER RIGHT NUMBER - A45-11644

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
FUNK

JACK

1 - RT. 3 BOX 3738

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-678-7985

FUNK

BONNIE

1 - RT. 3 BOX 3738

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-678-7985

+ - - PRIORITY DATE - - +
03/01/1962

+ - - - REGION - - - +
17 SOUTHERN

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

+ - - - STATUS - - - - +

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

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

[illegible]

11S 23E 9 NE NE (31) CASSIA

| CODE | DESCRIPTION | PERIOD FROM | PERIOD TO | DIVERSION RATE | DIVERSION VOLUME |
|-----------------|-------------|-------------|-----------|----------------|------------------|
| 43 - DOMESTIC | | 01/01 | 12/31 | 0.040 | |
| 04 - STOCKWATER | | 01/01 | 12/31 | 0.020 | |

| + | - | TOTAL DIV. RATE - | + | + | - | TOTAL DIV. VOLUME - | + | + | - | TOTAL DIV. CAPACITY - | + | + | - | TOTAL CONSUMPTIVE USE - | + | + | - | KW USAGE - | + |
|---|---|-------------------|---|---|---|---------------------|---|---|---|-----------------------|---|---|---|-------------------------|---|---|---|------------|---|
| | | 0.060 | | | | | | | | | | | | 0.0 | | | | | |

| TWN | RNG | SEC | TRACT | LOT | ACRES | PLACE OF USE
CODE | DESCRIPTION | COUNTY |
|-----|-----|-----|-------|-----|-------|----------------------|-------------|--------------|
| 11S | 23E | 9 | NE NE | | | 04 | STOCKWATER | (31) CASSIA |
| 11S | 23E | 9 | NE NE | | | 43 | DOMESTIC | (31) CASSIA |

+ - - DIVERSION MEANS - 6"X 75' WELL, 3/4 HP SUBM. PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE S/8 HORSES

+ - - OTHER RIGHTS FOR SAME USE - NONE

| + | REMARKS | + |
|---|-------------------|---|
| | NO REMARKS FOUND. | |

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

MICROFILMED
JUL 26 1994

CERTIFIED
DEC 23 1991
WATER EXAMINER