

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1176

RIGHT NUMBER: 45-11653

NAME & ADDRESS: JOHN MARTENS
GAYLE MARTENS
PO BOX 878
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.08 CFS

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

PRIORITY DATE: 10/01/1986

POINT OF DIVERSION: T10S R23E S36 SWNEW Within CASSIA County

PURPOSE AND

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

PLACE OF USE: STOCKWATER Within CASSIA County
T10S R23E S36 NENW

DOMESTIC Within CASSIA County
T10S R23E S36 NENW

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. 10S23E362700
STOCKWATER, UNSPECIFIED AMOUNT

Claim proofread by: an

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: A45-11653
Date Received: 6/23/1989
Receipt No: S008152
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOHN MARTENS 208-678-4501
Address: P.O. BOX 878
BURLEY, ID 83318

AND

Name: GAYLE MARTENS 208-678-4501
Address: P.O. BOX 878
BURLEY, ID 83318

2. Date of Priority: OCT 01, 1986

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	23E	36	SW	NE	NW		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	0.040		

7. Total Quantity Appropriated is:
0.080 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/??

A45-11653

Page 1

Date: 06/23/89

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MAR 09 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	23E	36	NE	NW		DOMEST	
			NE	NW		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 FALLS

CIVIL CASE NUMBER: 39576

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

Identification No. A45-11653

Date Received _____

Receipt Number _____

**RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT**

JUN 08 1989

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) John + Gayle Martens Phone (208) 678-4501

Mailing Address Box 878 Burley, Ida 83318 Zip _____

2. Date of Priority (Only one per claim) 10-1-86 Month/Day/Year

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

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

4. Location of point of diversion is: Township 10 Range 23

Section 36, SW 1/4 of NE 1/4 of NW 1/4, Govt. Lot _____, BM.,

County of County 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 casing size 6" How deep 90ft

Kind of Pump Grundfos HP 3/4 How get to house live line

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

For Domestic purposes from Jan 1 to Dec 31 amount 104 (cfs)

For Stock purposes from Jan 1 to Dec 31 amount 104 (Both dates are inclusive)

7. Total quantity claimed 108 (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) Serving 1 Household Live stock none

MAR 09 1993

10. Place of use is: Township: 10 Range 23
Section NE 1/4 of NW 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.

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 not needed.

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) Gayle Martens Date 6-7-89
John E Martens Date 6-7-89

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 Cassia) SS.

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

SEAL

Notary Public Linda J Hoxsey

Residing at Burley, Idaho

My Commission Expires Dec. '94

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 09 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3576

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Aug. 15, 1989

Re: A45-11653

JOHN MARTENS
P O BOX 878
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

/js

Enclosures:

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MAR 09 1993

WATER RIGHT NUMBER - A45-11653

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - - LAST NAME - - - - - + + - FIRST NAME - - + + - - - - - - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
MARTENS

JOHN

1 - P.O. BOX 878

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-678-4501

MARTENS

GAYLE

1 - P.O. BOX 878

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-678-4501

+ - - PRIORITY DATE - - + + - - - REGION - - - + + - - - STAGE - - - + + - - - STATUS - - - - +
10/01/1986 17 SOUTHERN J - BENEFICIAL USE+ - - - - - - - SOURCE - - - - - + + - +
GROUNDWATER TRIBUTARY+ - +
TWN RNG SEC TRACT LOT RFLG COUNTY POINT OF DIVERSION STREAM INDEX (BLANK IF NO INDEX CODE)

10S 23E 36 SW NE NW (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 0.040+ - TOTAL DIV. RATE - + + - TOTAL DIV. VOLUME - + + - TOTAL DIV. CAPACITY - + + - TOTAL CONSUMPTIVE USE - + + - KW USAGE - +
0.080 0.0+ - +
TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION COUNTY
10S 23E 36 NE NW 04 STOCKWATER (31) CASSIA
10S 23E 36 NE NW 43 DOMESTIC (31) CASSIA

+ - - DIVERSION MEANS - WELL AND PUMP

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

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - +
REMARKS
NO REMARKS FOUND.+ - +
OLD WATER RIGHT NUMBERS
NO OLD WATER RIGHT NUMBERS FOUND.MICROFILMED
JUL 26 1994

WATER EXAMINER