

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1183

RIGHT NUMBER: 45-11662

NAME & ADDRESS: CECIL LYNN BLAUER
KATHRYN JUNE BLAUER
RT 1 BOX 1514
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: 12/31/1977

POINT OF DIVERSION: T10S R23E S36 NWSESE 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
T10S R23E S36 SESE

DOMESTIC Within CASSIA County
T10S R23E S36 SESE

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 NOS. 10S23E369190, 10S23E369150
STOCKWATER, 4 CALVES, 1 HORSE

Claim proofread by: CJ

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: A45-11662
Date Received: 6/20/1989
Receipt No: S008160
Received By: lu

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CECIL LYNN BLAUER 208-678-5424
Address: RT 1 BOX 1514
BURLEY, ID 83318

AND/OR
Name: KATHRYN JUNE BLAUER 208-678-5424
Address: RT 1 BOX 1514
BURLEY, ID 83318

2. Date of Priority: DEC 31, 1977

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	NW	SE	SE		CASSIA

5. Description of diverting works:
8"X150' WELL, 1HP PUMP, PIPE

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:
0.040 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
S/4 CALVES, 1 HORSE, D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	23E	36	SE SE		DOMEST 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:
PURCHASED HOUSE 8/88

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. A45-11662

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

Kathryn June BLAUER1. Name of Claimant (s) Cecil Lynn BLAUER Phone (208) 678-5424Mailing Address Rt 1 Box 1514 Burley, Id. Zip 833182. Date of Priority (Only one per claim) 19 77 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 36 NW 1/4 of SE 1/4 of SE 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. House AND YARD usewell 8" casing 150' deep 1hp, submersible pump, pipe to house.

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 Stock purposes from " (Both dates are inclusive) to " amount .027. 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) Four calves & one horseMICROFILMED
MAR 09 1993

10. Place of use is: Township: 10 Range 23
Section 36 SE 1/4 of SE 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 (X)

14. Remarks: I just Bought the House 8-1988

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) Carl Lynn + Kathryn June Blauer

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) Carl Lynn Blauer Date 6-8-89
Kathryn June Blauer Date 6-8-89

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

of _____, Title _____, 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 Idaho)
County of CASSIA) SS.

Subscribed and sworn (or affirmed) before me this 8th day of June 19 89

SEAL

Notary Public Janet Klemm

Residing at Burley, Cassia, Idaho

My Commission Expires Sept. 23, 1992

Last Name Blauer 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. 23, 1989

Re: A45-11662

CECIL LYNN BLAUER
RT 1 BOX 1514
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'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

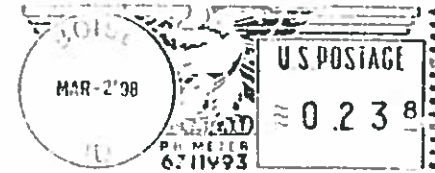
MAR 14 1993

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

PRESENTED
FIRST CLASS



3/10/98 dm
IMPORTANT WATER RIGHT INFORMATION

45-11662

CECIL LYNN BLAUER
KATHRYN JUNE BLAUER
RT 1 BOX 151A
BURLEY ID 83318

428 E 175 SO.

RECEIVED

MAR 06 1998

Department of Water Resources

83318X9801 83318



WATER RIGHT NUMBER - A45-11662

PREFIX TRANSLATION: ADJUDICATION CLAIM

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

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 06/20/89 WHITE

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

NO COMMENTS FOUND

[illegible]

COURT REPORT FILING	-	00/00/0000
OBJECTION FILED DATE	-	00/00/0000
RESPONSE FILED DATE	-	00/00/0000
CLAIM RECEIVED DATE	-	06/13/1989
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             - S008160
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	-	

10523E 369190 ①
10523E 369150 S/

DATA ENTRY

ENTERED 12-28-92
CHECKED 2/6/93

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

VERIFIED
NOV 14 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER