

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1216

RIGHT NUMBER: 45-11699

NAME & ADDRESS: PAUL SEARLE
KAREN SEARLE
RT 3 BOX 3684
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: 12/31/1940

POINT OF DIVERSION: T11S R23E S27 NENWNW Within CASSIA County

PURPOSE AND
PERIOD OF USE: PURPOSE OF USE *8/1/8/98* PERIOD OF USE QUANTITY
DOMESTIC ~~DOMESTIC~~ 1 HOME 01-01 12-31 0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T11S R23E S27 NWNW

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.
PARCEL NO. 11S23E273005

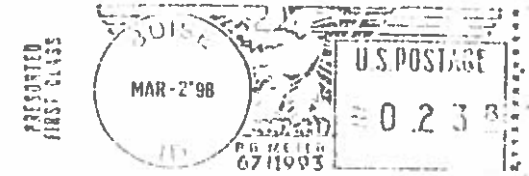
EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim proofread by: *CJ*
Date: *9-29*

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

RETURN SERVICE REQUESTED

DATE WHEN DONE
REMAILED



3/12/98 *du* 45-11700
IMPORTANT WATER RIGHT INFORMATION

171 E. 600 So.

45-11699
PAUL SEARLE
KAREN SEARLE
RT 3 BOX 3684
BURLEY ID 83318

RECEIVED
MAR 06 1998
Department of Water Resources

83318X9578 45318



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: A45-11699
Date Received: 6/14/1989
Receipt No: _____
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: PAUL SEARLE 208-678-5060
Address: RT. 3 BOX 3684
BURLEY, ID 83318

OR
Name: KAREN SEARLE 208-678-5060
Address: RT. 3 BOX 3684
BURLEY, ID 83318

2. Date of Priority: DEC 31, 1940

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	27	NE	NW	NW		CASSIA

5. Description of diverting works:
WELL & PUMP, PIPELINE

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 HOUSEHOLD

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
11S	23E	27	NW NW		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:

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. A45-11699

Date Received _____

Receipt Number 5008215 40RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 09 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) ^{Karen} Paul ~~or~~ Searle Phone (208) 678-5060Mailing Address Rt #3 Box 3684 Burley, Idaho Zip 833182. Date of Priority (Only one per claim) before 1940 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 South Range 23 EastSection 27, NE 1/4 of N.W. 1/4 of N.W. 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, pump, pipeline

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 .04 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .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) House hold 1

10. Place of use is: Township: 11 South Range 23 East

Section 27, N.E. 1/4 of N.W. 1/4, Govt. Lot N.W., 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? _____

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 _____

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

Signature of Claimant (s) Paul m Seash Date JUNE 8-89

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 Cassia } SS.

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

SEAL

Notary Public Beta Miller

Residing at Burley, Idaho

My Commission Expires June 1, 1994

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED
MAR 09 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 4, 1989

Re: A45-02427

A45-11699-1

A45-11700

.PAUL SEARLE
.RT 3 BOX 3684
.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 09 1993

OLD (D) NUMBER -

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

STATE- 10 ZIP- 83318

STATE- ID ZIP- 83318

+ - - - STATUS - - - - +

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

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

MICROFILMED
OCT 26 1994

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

09/08/91 11:28:46
PAGE 2

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - DECREE DATE - +
00/00/0000

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

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| | | | | | | | | |
|-----------------------|---|------------|-----------------------|---|------------|-------------------------|---|-------|
| 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 | - | 06/14/1989 | 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 | - | S008215 | FEDERAL/STATE INDICATOR | - | S |
| CLAIMS TAPE ERROR FLG | - | | POU OWNERSHIP FLAG | - | Y | PRESUMPTION FLAG | - | |
| FEE EXEMPT FLAG | - | | NAME CONNECTOR | - | OR | NOTICE OF ERROR FLAG | - | |

11523E27 3005

ENTERED 12-28-92
CHECKED 8/6/93

"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