

RIGHT NUMBER: 45-11736

NAME & ADDRESS: WENDELL L WELLS
RT 2 BOX 2115
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: 06/01/1986

POINT OF DIVERSION: T11S R22E S01 LOT 1 (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 R22E S01 Lot 1 (NENE)

DOMESTIC Within CASSIA County
T11S R22E S01 Lot 1 (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. 11S22E010150
STOCKWATER, UNSPECIFIED AMOUNTClaim proofread by: C.A.
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: A45-11736
Date Received: 6/20/1989
Receipt No: S008297
Received By: See

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: WENDELL L. WELLS 208-678-9389
Address: RT. 2 BOX 2115
BURLEY, ID 83318

2. Date of Priority: JUN 01, 1986

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	22E	1	NE	NE	NE	1	CASSIA

5. Description of diverting works:
6"X 70' WELL, 1½ 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/MIXED

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
11S	22E	1	NE	NE	1	DOMEST	
			NE	NE	1	STOCK	

A45-11736

Page 1

Date: 06/20/89

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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:
A45-11735

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. 445-11736Date Received 6-7-89Receipt Number 5008297 secRECEIVED NOTICE OF CLAIM
TO A
WATER RIGHTJUN 7 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) Wendell L. Wells Phone (208) 678-9389Mailing Address Rt 2 Box 2115 Burley, Idaho Zip 833182. Date of Priority (Only one per claim) June 1, 1986 Month/Day/Year3. 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 11 South Range 22 EastSection 1 1/4 of NE 1/4 of NE 1/4, Govt. Lot 1, 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, 70' deep, 1 1/2 h.p. submersible pump, pipe to house and hydrant.

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 .04 (cfs)(Both dates are inclusive)
For Stockwater purposes from 1-1 to 12-31 amount .027. Total quantity claimed .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) One, various fowl and small hooved stock household

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10. Place of use is: Township: 11 South Range 22 East

Section 1, 1/4 of 1/4, Govt. Lot 1, 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 ()
Second Well

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 _____

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 X

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) [Signature] Date 6-5-89
_____ 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 Idaho)
County of Cassia) SS.

Subscribed and sworn (or affirmed) before me this 5 day of June 19 89

SEAL

Notary Public Marcia Mendenhall

Residing at 737 Berkeley Avenue, Burley, Idaho 83318

My Commission Expires July 22, 1993

Last Name Mendenhall Ident No. 481-72-5600

Copies: White-State, Yellow-Claimant



United States Department of the Interior

GEOLOGICAL SURVEY
WATER RESOURCES DIVISION
230 Collins Road
Boise, Idaho 83702

March 3, 1988

Dear Well Owner:

Samples of ground water were collected from many wells in your area as part of a study in the Burley Irrigation District. Enclosed are the following: (1) a table of water-quality data--the water analyses from your well have been highlighted; and (2) a table listing selected water-quality characteristics, their sources or causes, and their significance.

In the water-quality data table, "local identifier" is the well location in township-range-section; "date of sample" is listed in year-month-day; "time" is military (24-hour) time; and "temperature" is in degrees Celsius ($^{\circ}\text{C} \times 9.5 + 32 = ^{\circ}\text{F}$). Drinking water standards mentioned in the water standards table apply only to public water supplies but may be of comparative use for domestic supplies.

Thank you for your help.

Sincerely,

Deb Parlman

Deb Parlman
Hydrologist

Enclosures

DJP/mr

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UNITED STATES DEPARTMENT OF INTERIOR - GEOLOGICAL SURVEY
MULTIPLE STATION ANALYSES

PROCESS DATE 3-02-88

LOCAL IDENT- I- FIER	DATE	TIME	DEPTH OF WELL, TOTAL (FEET) (72008)	DEPTH BELOW SURFACE (WATER LEVEL) (FEET) (72019)	TEMPER- ATURE WATER (DEG C) (00010)	SPE- CIFIC CON- DUCT- ANCE (US/CM) (00095)	PH (STAND- ARD UNITS) (00400)	ALKA- LINITY WH WAT TOTAL FIELD MG/L AS CAC03 (00410)	NITRO- GEN, NO2+NO3 DIS- SOLVED MG/L AS N1 (00631)	NITRO- GEN, AM- MONIA + ORGANIC DIS. MG/L AS N) (00623)
CASSIA COUNTY										
10S 22E 22	04-16-87	1450	20.00	17.96	11.5	996	7.50	300	18.0	2.4
	06-24-87	1105	20.00	15.52	12.5	745	7.30	290	7.90	1.1
	09-17-87	1800	20.00	12.16	14.0	735	7.20	290	3.60	0.20
	01-22-88	1045	20.00	16.22	12.5	736	7.60	290	4.90	0.50
10S 22E 26	03-31-87	1000	60.00	27.49	12.0	820	7.40	310	6.70	1.6
	04-24-87	0945	60.00	26.86	12.0	823	7.40	310	--	--
	06-24-87	0900	60.00	24.27	12.5	830	7.70	320	7.00	0.20
	09-17-87	1715	60.00	22.15	13.0	892	7.20	320	6.60	0.70
10S 22E 35	01-22-88	1115	60.00	29.36	--	--	--	--	--	--
	04-16-87	1740	235.00	216.22	12.5	1020	7.50	328	10.0	2.5
	06-24-87	1005	235.00	215.93	14.0	1030	7.90	340	11.0	1.8
	09-17-87	1545	235.00	214.05	14.0	932	7.40	310	7.50	<0.20
10S 23E 28	01-22-88	1015	235.00	--	--	938	7.40	310	7.90	0.50
	04-08-87	1400	105.00	37.23	11.5	804	7.50	310	--	--
	06-23-87	1900	105.00	35.81	14.5	786	7.30	310	5.00	<0.20
	09-17-87	0930	105.00	34.33	15.5	797	7.40	310	5.00	<0.20
10S 23E 34	01-20-88	1400	105.00	36.65	9.5	781	7.40	310	5.20	0.80
	04-03-84	1200	240.00	147.86	--	--	--	--	--	--
	04-17-87	1015	240.00	147.90	14.5	437	7.60	143	0.370	2.7
	06-23-87	1220	240.00	149.30	14.5	438	7.70	150	0.300	0.90
10S 23E 35	09-17-87	1100	240.00	148.80	14.5	434	--	--	0.300	--
	01-21-88	0915	240.00	149.92	12.5	437	7.60	150	0.400	0.30
	04-08-87	0915	80.00	37.55	12.0	811	7.50	282	10.0	0.80
	06-23-87	1315	80.00	36.19	13.0	835	7.40	290	11.0	0.90
10S 24E 26	09-17-87	1030	80.00	35.48	12.0	775	--	240	9.20	0.70
	01-20-88	1500	80.00	37.30	11.5	838	7.30	280	11.0	0.50
	04-09-87	1400	80.00	14.91	12.0	695	7.50	268	4.80	0.50
	06-22-87	1435	80.00	6.51	13.0	672	7.30	250	4.60	1.1
10S 24E 32	09-16-87	1150	80.00	6.07	12.5	740	7.20	290	3.50	0.50
	01-20-88	1600	80.00	11.32	12.0	685	7.20	--	3.40	0.30
	04-17-87	1150	30.50	26.80	12.5	881	7.60	310	9.40	1.8
	06-22-87	1545	30.50	20.42	12.0	830	7.40	300	8.00	1.3
10S 22E 01AAA1	09-16-87	1345	30.50	18.19	11.5	816	7.40	290	8.00	0.40
	01-21-88	1015	30.50	24.22	--	847	7.40	320	9.30	0.40
	04-14-87	1545	70.00	36.47	13.0	562	7.00	175	6.80	1.1
	06-23-87	1435	70.00	30.88	14.0	526	6.90	180	4.50	0.60
10S 22E 01AAA1	09-17-87	1630	70.00	27.31	13.5	525	6.90	170	4.10	0.20
	01-22-88	0950	70.00	32.23	13.0	509	7.00	180	4.40	<0.20
	04-20-87	1830	206.00	152.90	12.5	1260	7.40	267	11.0	1.1
	06-23-87	1545	206.00	141.94	13.5	1160	7.30	250	9.10	0.80

MARK 09 1993

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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: A45-11736-
A45-11735

WENDELL L WELLS
RT 2 BOX 2115
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:

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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
REMAILED

POSTAGE
FIRST CLASS



3/12/98 dur 45-11735

IMPORTANT WATER RIGHT INFORMATION

115 West 200 South

45-11736

WENDELL L WELLS
RT 2 BOX 2115
BURLEY ID 83318

RECEIVED

MAR 06 1998

Department of Water Resources

83318-9609



WATER RIGHT NUMBER - A45-11736

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
WELLS

WENDELL L.

1 - RT. 2 BOX 2115

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 208-678-9389

+ - - PRIORITY DATE - - +
06/01/1986

+ - - - REGION - - - +
17 SOUTHERN

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

+ - - - STATUS - - - - +

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

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

TWN	RNG	SEC	TRACT	LOT	RFLG	COUNTY	POINT OF DIVERSION	STREAM INDEX (BLANK IF NO INDEX CODE)
14N	1E	1	1	1		CLATSOP		

11S 22E 1 NE NE 1 (31) CASSIA

+	CODE	DESCRIPTION	PERIOD FROM	PERIOD TO	WATER USE	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	22E	1	NE NE	1	04	STOCKWATER	(31)	CASSIA
11S	22E	1	NE NE	1	43	DOMESTIC	(31)	CASSIA

+ - - DIVERSION MEANS - 6"X 70' WELL, 1= HP SUBM. PUMP.

+ - - NON-IRRIGATION USE - D/I HOUSE S/MIXED

+ - - OTHER RIGHTS FOR SAME USE - A45-11735

+ - - - - REMARKS
NO REMARKS FOUND.

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

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

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

MICROFILMED
JUL 6 1994

CERTIFIED
DEC 23 1991
WATER EXAMINER