

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1279

RIGHT NUMBER: 45-11785

NAME & ADDRESS: MARIE CLAYTON
DWAYNE CLAYTON
RT 3 BOX 3255
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: 12/31/1930

POINT OF DIVERSION: T11S R24E S08 NWSW 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 R24E S08 NWSW

DOMESTIC Within CASSIA County
T11S R24E S08 NWSW

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. 11S24E083600
STOCKWATER, 50 BEEF

Claim proofread by:

Date:

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: A45-11785
Date Received: 6/30/1989
Receipt No: C007370
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DWAYNE CLAYTON 208-654-9254
Address: RT 3 BOX 3255
BURLEY, ID 83318

OR
Name: MARIE CLAYTON 208-654-9254
Address: RT 3 BOX 3255
BURLEY, ID 83318

2. Date of Priority: DEC 31, 1930

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	24E	8	SW	NW			CASSIA

5. Description of diverting works:
30' WELL W/ 4" CASING AND 1/2 HP 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:
ONE HOUSE AND UP TO 50 BEEF

A45-11785

Page 1

Date: 06/30/89

MICROFILMED

MAR 9 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	24E	8	SW	NW		STOCK	
			SW	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:
BID

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. 495-11784

Date Received _____

Receipt Number C067370NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Department of Water Resources

RECEIVED

JUN 08 1989

Please type or print clearly

1. Name of Claimant (s) Dewayne or Marie Clayton Phone (208 654-9254
Mailing Address Route #3 Box 3255 Burley Ida Zip 823182. Date of Priority (Only one per claim) 1930 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
which is tributary to (b) _____ Name or kind of source4. Location of point of diversion is: Township 11 Range 24
Section 8 , NW 1/4 of SW 1/4 of _____ 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. 30ft well 4 inch casing 1/2 HP Pump

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

7. Total quantity claimed _____ (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 Stock 50 Cattle

MAR 09 1993

10. Place of use is: Township: 11 Range 24

Section 8, NW 1/4 of SW 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 11784

12. Do you own the property listed above as place of use? Yes X No _____ C007370
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: BID Irrigation

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 X

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

Signature of Claimant (s) D. L. Clayton Date _____
_____ 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 17th day of June 19 89

SEAL

Notary Public Walter Carlson

Residing at Barley Id.

My Commission Expires 10-3-93

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 10 1993

JUL 20 1994

PREFIX TRANSLATION: ADJUDICATION CLAIM

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+ - - - - - - - - - - - - - - - - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +
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115246083600

CHECKED

VERIFIED
NOV 13 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER