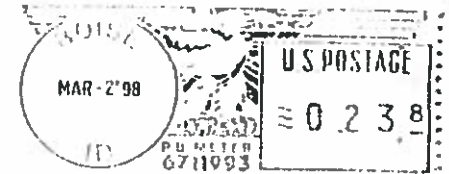


STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

RETURN SERVICE REQUESTED

DATA ENTRY DONE
REMAILED

PROVIDED
FIRST CLASS



3/12/98 *dm*
IMPORTANT WATER RIGHT INFORMATION

45 50600 W

45-11798
SCOTT L TIBBITTS
RT 4 BOX 4184
BURLEY ID 83318

RECEIVED

MAR 06 1998

Department of Water Resources

Handwritten: 3/11/98

83318>9418 454318



AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1290

RIGHT NUMBER: 45-11798

NAME & ADDRESS: SCOTT L TIBBITTS
RT 4 BOX 4184
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: 06/15/1983

POINT OF DIVERSION: T10S R22E S29 SWSNW 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 R22E S29 SWNW

DOMESTIC Within CASSIA County
T10S R22E S29 SWNW

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. 10S22E293960
STOCKWATER, 3 HORSES, 3 CALVES, 8 HOGS

Claim proofread by: CA
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: A45-11798
Date Received: 7/06/1989
Receipt No: S008452
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SCOTT L. TIBBITTS 208-678-1767
Address: RT. 4 BOX 4184
BURLEY, ID 83318

2. Date of Priority: JUN 15, 1983

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	22E	29	SW	SW	NW		CASSIA

5. Description of diverting works:
6"X 350' WELL, 3 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	0.040		

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/3 HORSES, 3 CALVES, 8 HOGS

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
10S	22E	29	SW	NW		DOMEST	
			SW	NW		STOCK	

A45-11798

Page 1

Date: 07/06/89

MICROFILMED

MAR 10 1993

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

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

CIVIL CASE NUMBER: 39576

Identification No. A45-11798

Date Received

Receipt Number 5008452 *see*

RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 13 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.

JUL - 3 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) SCOTT L. B. BITHS Phone (208) 678-1767Mailing Address Rt 4 BOX 4184 Zip 833182. Date of Priority (Only one per claim) 1983, JUNE, 15 Month/Day/Year3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 10S Range 22ESection 29, SW 1/4 of SW 1/4 of NW 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. 350' DEEP 6" CASING 3 H.P. SUBMERSIBLE PUMP.PIPE TO HOUSE 1 1/4"

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

For DOMESTIC purposes from 1-1 to 12-31 amount 0.04 (cfs)For STOCKWATER purposes from 1-1 to 12-31 amount 0.04 (Both dates are inclusive)7. Total quantity claimed 0.08 (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) 1 HOME, 3 HEAD HORSES, 3 CALFS, 8 FEEDER HQGS2 ACRES

MICROFILMED

MAR 10 1993

10. Place of use is: Township: 10S Range 22E
Section 29, SW 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. 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 _____

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) Scott L. Whitte Date June 6, 1989
_____ Date _____

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

_____ Title
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
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 22 day of June 19 89

Notary Public Cheryl Lullette
Residing at Burley, Idaho
My Commission Expires 1992

Last Name Lullette Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 10 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. 11, 1989

Re: A45-11798

SCOTT L TIBBITTS
RT 4 BOX 4184
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

/jg

Enclosures:

MICROFILMED

MAR 10 1993

WATER RIGHT NUMBER - A45-11798

PREFIX TRANSLATION: ADJUDICATION CLAIM

CLD (CD) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
TIBBITTS

SCOTT L.

1 - RT. 4 BOX 4184

2 -

3 -

CITY- BURLEY

STATE- ID ZIP- 83318

PHONE - 203-678-1767

+ - - PRIORITY DATE - - +
06/15/1983+ - - - REGION - - - +
17 SOUTHERN+ - - - STAGE - - - +
J - BENEFICIAL USE

+ - - - STATUS - - - +

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

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

+ - - - - POINT OF DIVERSION - - - - - +
TWN RNG SEC TRACT LOT RFLG COUNTY STREAM INDEX (BLANK IF NO INDEX CODE)

10S 22E 29 SW SW NW (31) CASSIA

+ - - - - WATER USE - - - - - +
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+ - - - - PLACE OF USE - - - - - +
TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION COUNTY

10S

22E

29

SW NW

04

STOCKWATER

(31) CASSIA

10S

22E

29

SW NW

43

DOMESTIC

(31) CASSIA

+ - - DIVERSION MEANS - 6"X 350' WELL, 3 HP SUBM. PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE S/3 HORSES, 3 CALVES, 8 HUGS

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - REMARKS - - - - - +
NO REMARKS FOUND.+ - - - - OLD WATER RIGHT NUMBERS - - - - - +
NO OLD WATER RIGHT NUMBERS FOUND.+ - - - - CONDITIONS OF APPROVAL - - - - - +
NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

MICROFILMED

JUL 26 1994

+ - DECREE DATE - +
00/00/0000

PREFIX TRANSLATION: ADJUDICATION CLAIM

```
+-----+-----COMMENTS-----+
```

NO COMMENTS FOUND

```
+ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ADJUDICATION RIGHTS DATES AND FLAGS AREA ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ +
```

10522 € 293960

VERIFIED
NOV 13 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER