

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1301

RIGHT NUMBER: 45-11815

NAME & ADDRESS: THOMAS L BATTERTON
PO BOX 134
ALBION ID 83311

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 06/10/1920

POINT OF DIVERSION: T12S R25E S06 SWNWNE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T12S R25E S06 NWNE

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. ABR04003013A

Claim proofread by: CM

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: A45-11815
Date Received: 7/07/1989
Receipt No: S008477
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: THOMAS L. BATTERTON 208-673-6221
Address: P.O. BOX 134
ALBION, ID 83311

2. Date of Priority: JUN 10, 1920

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
12S	25E	6	SW	NW	NE		CASSIA

5. Description of diverting works:
WELL AND 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		

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 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
12S	25E	6	NW	NE		DOMEST	

11. Place of use in counties: CASSIA

A45-11815

Page 1

Date: 07/07/89

MICROFILMED
MAR 10 1993

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. A45-11815

Date Received _____

Receipt Number _____

RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 09 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.

RECEIVED

JUL 05 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Thomas L BATTERTON Phone (208) 623-4221Mailing Address Box 134 Albion Idaho Zip 833112. Date of Priority (Only one per claim) June 10, 1920 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 12 Range 25Section 6, SW 1/4 of NW 1/4 of NE 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 Hand dug with 8" CAPED CASING. APPROXIMATELY 20' DEEP

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 _____ 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) 1 House Hold

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MAR 10 1993

10. Place of use is: Township: 12 Range 25

Section 6 NW 1/4 of NE 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) Thomas L Batterton Date 6-7-89

_____ 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 1th day of June 19 89

SEAL

Notary Public Betty Plump

Residing at Albion, Cassia City, Id

My Commission Expires 4-28-94

Last Name Batterton Ident No. _____

Copies: White-State, Yellow-Claimant

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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

RECEIVED

JUL -5 1989

Department of Water Resources
Southern Region Office

Thomas L. Batterton
Box 134
Albion, Idaho 83311

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your ^{Money Order} check # 833110 for \$ 85.00 which you submitted to our office. I am returning these pursuant to Rule 10,4 of the Department's Adjudications Rules and Regulations. In checking your claim it appears that the following items need clarification:

- ☒ Item #2 Priority *Estimated date well was first used by anyone,*
- ☐ Item #4 Point of Diversion Legal Description
- ☐ Item #6 Uses descriptions
- ☐ Item #9 Description of Non-irrigation Uses
- ☐ Item #10 Place of Use Legal Description
- ☐ Item #16 Signature & Notorization
- ☐ Improper fee (THE CORRECT FEE IS \$ _____)
- ☐ Other or Remarks

~~If you wish to continue to press your claim please find enclosed instructions and another claim form to use.~~ If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional late fee of \$ 50.00.

BEFORE RETURNING THE CLAIM PLEASE READ THE ENCLOSED DRAFT TEXT FOR D&S BROCHURE. Due to recent rulings by the court you may defer filing the claim if you so desire but it is recommended by the Department that you continue to press your claim. If you have any questions contact our office.

Sincerely,

Bob Worstell

Bob Worstell
Water Resource Agent

Note: Keep the postmarked envelope with this claim to show that it was submitted by the deadline date.

Encl:

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: A45-11815

. THOMAS L BATTERTON
. P O BOX 134
. ALBION ID 83311

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 10 1993

WATER RIGHT NUMBER - A45-11815

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
BATTERTON

THOMAS L.

1 - P.O. BOX 134

2 -

3 -

CITY- ALBION

PHONE - 208-673-6221

STATE- ID ZIP- 83311

+ - - PRIORITY DATE - - +
06/10/1920

+ - - - 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) |
|-----|-----|-----|-------|-----|------|--------|--------------------|---------------------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |

12S 25E 6 SW NW NE (31) CASSIA

| CODE | DESCRIPTION | PERIOD FROM | PERIOD TO | WATER USE | DIVERSION RATE | DIVERSION VOLUME |
|------|-------------|-------------|-----------|-----------|----------------|------------------|
| 1 | 1 | 1 | 1 | 1 | 1 | 1 |

43 - DOMESTIC

01/01

12/31

0.040

| + - TOTAL DIV. RATE - + | | + - TOTAL DIV. VOLUME - + | | + - TOTAL DIV. CAPACITY - + | | + - TOTAL CONSUMPTIVE USE - + | | + - KW USAGE - + | |
|-------------------------|-------|---------------------------|--|-----------------------------|--|-------------------------------|-----|------------------|--|
| | 0.040 | | | | | | 0.0 | | |

| TWN | RNG | SEC | TRACT | LOT | ACRES | PLACE OF USE CODE | DESCRIPTION | COUNTY |
|-----|-----|-----|-------|-----|-------|-------------------|-------------|---------|
| 14N | 10E | 36 | 36 | 1 | 0.10 | 000 | RESIDENTIAL | CLATSOP |

125

25E

6

NW NE

43 DOMESTIC

(31) CASSIA

+ - - DIVERSION MEANS - WELL AND PUMP

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

+ - - 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 - - - +

+ - - - - DEGREE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 07/07/89 CLELLAND

MICROFILMED
OCT 28 1994

WATER RIGHT NUMBER - A45-11815

PREFIX TRANSLATION: ADJUDICATION CLAIM

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

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

| | | | | | |
|-----------------------|--------------|-----------------------|--------------|-------------------------|---------|
| 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 | - 07/07/1989 | 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 | - S008477 | FEDERAL/STATE INDICATOR | - S |
| CLAIMS TAPE ERROR FLG | - | PGU OWNERSHIP FLAG | - Y | PRESUMPTION FLAG | - |
| FEE EXEMPT FLAG | - | NAME CONNECTOR | - | NOTICE OF ERROR FLAG | - |

ABR04003013A

DATA ENTRY
ENTERED 12-31-91
CHECKED 2/6/93

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

VERIFIED
NOV 15 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER