

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1302

RIGHT NUMBER: 45-11816

NAME & ADDRESS: JUDY VIGH
LORENZO T VIGH
RT 4
319 REDWOOD DR
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: 02/14/1975

POINT OF DIVERSION: T10S R22E S27 SENE 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
T10S R22E S27 SENE

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. 000030040100

Claim proofread by: CAH
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: A45-11816
Date Received: 7/07/1989
Receipt No: S008478
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: LORENZO T. VIGH 208-678-8616
Address: RT. 4
319 REDWOOD DR.
BURLEY, ID 83318

OR
Name: JUDY VIGH 208-678-8616
Address: RT. 4
319 REDWOOD DR.
BURLEY, ID 83318

2. Date of Priority: FEB 14, 1975

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	27	SE	NE			CASSIA

5. Description of diverting works:
4"X 260' WELL, 5 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		

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

A45-11816

Page 1

Date: 07/07/89

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MAR 10 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	22E	27	SE NE		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:

THIS WELL SERVES 3 HOUSES. (THIS CLAIM IS FOR ONLY ONE HOUSE)

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. A45-11816

Date Received

Receipt Number 3008478 SCCNOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JUN 6 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.

RECEIVED

JUL - 5 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) LORENZO T. or Judy VIGH Phone (208) 678-8616Mailing Address Route 4 319 Redwood Drive Burley, Idaho Zip 833182. Date of Priority (Only one per claim) 02/14/75 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 10 S Range 22 ESection 27 SE 1/4 of NE 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. well 4" casing, 260' deep, 5 hp submersible pump,3/4" pipe to house

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) Domestic: 3 households 1 household(This well serves 3 households)
S. T. V.

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10. Place of use is: Township: 10S Range 22 E
Section 27, SE 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) Lorenzo T. Vigil Date 6-2-89
_____ Date _____

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

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 2nd day of June 19 89

SEAL

Notary Public Deane M. Wake

Residing at Burley, Idaho

My Commission Expires 09/17/94

Last Name _____ 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

6/20/89

R. KEITH HIGGINSON

Director

RECEIVED

JUL - 5 1989

Department of Water Resources
Southern Region Office

Lorenzo T. Vigh
Route 4, 319 Redwood Dr
Burley, Idaho 83318

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 3863 for \$ 25.00 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

- () Item #2 Priority date (day/month/year)
- () 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 & Notarization
- () Improper fee (THE CORRECT FEE IS \$ _____)
- () Other or Remarks

— Water Uses for 3 houses after March 25, 1963 Requires 3 separate adjudication claims or an application for Permit.

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.

Sincerely,

Steve Clelland
Water Right's Agent

enc:

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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

. Aug. 11, 1989

Re: A45-11816

. LORENZO T VIGH
. RT 4
. 319 REDWOOD DR
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:

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MAR 10 1993

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

09/08/91 14:15:07
PAGE 2

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - DECEE DEFENDANT - - - +

+ - DECREE DATE - +
00/00/0000

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

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+ - - - - - - - - - - - - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +
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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	-	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	-	S008478	FEDERAL/STATE INDICATOR	-	S
CLAIMS TAPE ERROR FLG	-		POU OWNERSHIP FLAG	-	Y	PRESUMPTION FLAG	-	
FEE EXEMPT FLAG	-		NAME CONNECTOR	-	OR	NOTICE OF ERROR FLAG	-	

000030040100

ENTERED 12-31-92 10

CHECKED 2/6/93 AB

"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 15 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER