

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

3/10/98 AM

IMPORTANT WATER RIGHT INFORMATION

249 W 200 So.
45-41842
SYLVIA BECK
RT 4 BOX 4049
BURLEY ID 83318

RECEIVED

MAR 16 1998

Department of Water Resources

PRESORTED
FIRST CLASS



Handwritten note: 45-11842

83318X9405 83318



AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1324

RIGHT NUMBER: 45-11842

NAME & ADDRESS: SYLVIA BECK
RT 4 BOX 4049
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: 12/31/1915

POINT OF DIVERSION: T11S R22E S03 NESESE 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
T11S R22E S03 SESE

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. 11S22E037200

Claim proofread by: CW
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: A45-11842
Date Received: 7/11/1989
Receipt No: S008517
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SYLVIA BECK 208-678-5811
Address: RT. 4, BOX 4049
BURLEY, ID 83318

2. Date of Priority: DEC 31, 1915

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	22E	3	NE	SE	SE		CASSIA

5. Description of diverting works:
8" X300' WELL, WITH 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	Lot	Use	Acres
11S	22E	3	SE	SE		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:
IRRIG. WATER FROM THE BURLEY IRRIG. DIST.

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. A 45-11842Date Received 6-7-89Receipt Number 5008517

RECEIVED NOTICE OF CLAIM TO A WATER RIGHT

JUN 7 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.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Sylvia Beck Phone 208 678-5811Mailing Address P#4 Box 4049 Zip 833182. Date of Priority (Only one per claim) 12/31/1915 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other () (a) Domestic Well
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 11 Range 22Section 3, NE 1/4 of SE 1/4 of SE 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. 8' x 300' Well, with pump.

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

For Domestic purposes from year-round ^{Month/Day} to ^{Month/Day} _____ amount _____ (cfs)For _____ purposes from _____ to _____ 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) 1/1 House

MICROFILMED

MAR 10 1993

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

Section 3 1/4 of 1/4, Govt. Lot _____, B.M.,

County of _____ 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 X

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) Sylvia Beck

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) Sylvia Beck Date 6-6-89
_____ 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 Id)
County of CASSIA) SS.

Subscribed and sworn (or affirmed) before me this 6th day of June 19 89

SEAL

Notary Public [Signature]

Residing at _____

My Commission Expires _____

Last Name _____ 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

6/20/89

Sylvia Beck
RT. 4, Box 4049
Burley, Idaho
83318

445-11842
11843

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check^s # 145 + #146 each for \$ 25.00 each 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 - <i>Estimated</i> <u>Dates Wells were first used - by anyone</u> | |
| ☒ | Item #4 | Point of Diversion Legal Description | |
| ☒ | Item #6 | Uses descriptions <u>amount of water</u> | needs by 1/4 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

Encl:

MICROFILMED

MAR 10 1989

WATER RIGHT NUMBER - A45-11842

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - LAST NAME - - - - + + - FIRST NAME - - + + - - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
BECK

SYLVIA

1 - RT. 4, BOX 4049
2 -
3 -
CITY- BURLEY
PHONE - 208-678-5811

STATE- ID ZIP- 83318

+ - - PRIORITY DATE - - + + - - - REGION - - - + + - - - STAGE - - - + + - - - STATUS - - - - +
12/31/1915 17 SOUTHERN J - BENEFICIAL USE

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

TWN	RNG	SEC	TRACT	LOT	RFLG	COUNTY	POINT OF DIVERSION	STREAM INDEX (BLANK IF NO INDEX CODE)
11S	22E	3	NE SE SE			(31)	CASSIA	

CODE	DESCRIPTION	PERIOD FROM	PERIOD TO	WATER USE	DIVERSION RATE	DIVERSION VOLUME
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
11S	22E	3	SE SE			43 DOMESTIC		(31) CASSIA

+ - - DIVERSION MEANS - 8" X300' WELL, WITH PUMP.

+ - - NON-IRRIGATION USE - D/1 HOUSE.

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - - REMARKS - - - - - +
IRRIG. WATER FROM THE BURLEY IRRIG. DIST.

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

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

+ - - - - DECREE PLAINTIFF - - - + + - - - - DECREE DEFENDANT - - - +

+ - - AUDIT FIELDS - 07/11/89 WORSTELL

+ - DECREE DATE - +
00/00/0000
MICROFILMED
OCT 28 1994

WATER RIGHT NUMBER - A45-11842

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	- 07/11/1989	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	- S008517	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	-	NOTICE OF ERROR FLAG	-

115225037200

DATA ENTRY
ENTERED 1-11-93 Duf
CHECKED 2/3/93

"Verified By"
Topo Map/Oriho-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