

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1335

RIGHT NUMBER: 45-11856

NAME & ADDRESS: CLIFFORD GOICOECHEA
RUTH GOICOECHEA
3300 PARKE AVE
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: 09/20/1966

POINT OF DIVERSION: T10S R23E S31 NENESE 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
	T10S R23E S31	NESE
	DOMESTIC	Within CASSIA County
	T10S R23E S31	NESE

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. 000220010170
STOCKWATER, 2 HORSES.

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: A45-11856
Date Received: 6/08/1989
Receipt No: S008560
Received By: G. B. St.

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CLIFFORD GOICOECHEA 208-678-0527
Address: 3300 PARKE AVE.
BURLEY, ID 83318

OR
Name: RUTH GOICOECHEA 208-678-0527
Address: 3300 PARKE AVE.
BURLEY, ID 83318

2. Date of Priority: SEP 20, 1966

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	23E	31	NE	NE	SE		CASSIA

5. Description of diverting works:
8" X 75' WELL, 20 GPM 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:
D/1 HOUSE, S/2 HORSES.

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	23E	31	NE NE	SE SE	DOMEST STOCK	

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 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. A45-11856
Date Received 6-8-89
Receipt Number 5008560 *acc*NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

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.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) CLIFFORD & RUTH GOICOECHEA Phone (208) 678-0527Mailing Address 3300 Parke Ave, Burley Zip 833182. Date of Priority (Only one per claim) SEPT 20 / 66 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 Range 23Section 31, NE 1/4 of NE 1/4 of SE 1/4, Govt. Lot 0, BM.,County of CASSIAAdditional points of diversion if any: None5. 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. a well, 8" casing, 25' deep, 20 gal. per minute submersible pump, pipe to house.

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

		Month/Day	to	Month/Day	(cfs)
For <u>Domestic</u> purposes from	<u>1/1</u>			<u>12/31</u>	<u>.04</u>
		(Both dates are inclusive)			
For <u>Stockwater</u> purposes from	<u>1/1</u>			<u>12/31</u>	<u>.02</u>

7. Total quantity claimed .06 (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 1 stockwater 2 horses

MICROFILMED

MAR 10 1993

10. Place of use is: Township: 10 Range 23
Section 31, NE 1/4 of SE 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? _____

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 ()
None

14. Remarks: ~~There is no water for the water right~~

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 none

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) Clifford Horgiehn Date 6/8/89
Ruth Loewen Date 6/8/89

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

of _____, Title _____, that I have signed the foregoing
document in the space below as _____ of _____
Organization 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 8th day of June 19 89

SEAL

Notary Public Laure Schmitt

Residing at Heyburn, Id.

My Commission Expires 3-22-91

Last Name Schmitt 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

June 20, 1989

RECEIVED

JUL 13 1989

Clifford or Ruth Goicoechea
3300 Parke Ave.
Burley, ID 83318

Department of Water Resources
Southern Region Office

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 3617 for \$ 25.00 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 *Best estimate of when well was first used*
- ☐ 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

*I looked
on well and
this date was
in Cement. must
be when Morely's
sunk the well.
Thanks*

~~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:

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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

.Sept. 5, 1989

Re: A45-11856

.CLIFFORD GOICOECHEA
.3300 PARKE AVE
.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 you claim(s), please contact this office.

Yours truly,

A handwritten signature in cursive script, appearing to read 'Judy'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 10 1993

WATER RIGHT NUMBER - A45-11856

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***
GOICOCHEA

CLIFFORD

1 - 3300 PARKE AVE.
2 -
3 -

CITY- BURLEY
PHONE - 208-678-0527
1 - 3300 PARKE AVE.
2 -
3 -

STATE- ID ZIP- 83318

GOICOCHEA

RUTH

CITY- BURLEY
PHONE - 208-678-0527

STATE- ID ZIP- 83318

+ - - PRIORITY DATE - - +
09/20/1966

+ - - - 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 23E 31 NE NE SE (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 0.020

+ - TOTAL DIV. RATE - + + - TOTAL DIV. VOLUME - + + - TOTAL DIV. CAPACITY - + + - TOTAL CONSUMPTIVE USE - + + - KW USAGE - +
0.060 0.0

+ - - - - PLACE OF USE - - - - - +
TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION COUNTY
10S 23E 31 NE SE 04 STOCKWATER (31) CASSIA
10S 23E 31 NE SE 43 DOMESTIC (31) CASSIA

+ - - DIVERSION MEANS - 8" X 75' WELL, 20 GPM PUMP.

+ - - NON-IRRIGATION USE - D/1 HOUSE, S/2 HORSES.

+ - - OTHER RIGHTS FOR SAME USE - NONE.

Sylvan Acres
L 17 B1

+ - - - - REMARKS - - - - - +
NO REMARKS FOUND.

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

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OCT 28 1994

PREFIX TRANSLATION: ADJUDICATION CLAIM

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+ - - - - - + - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +
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CERTIFIED
DEC 29 1991
WATER EXAMINER