

AJ5856NP

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

DATE: SEP-9-1997
PAGE: A-1337

RIGHT NUMBER: 45-11858

NAME & ADDRESS: DENNIS CLAUNCH
LORNA CLAUNCH
RT 1
407 HILLCREST
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: 11/10/1986

POINT OF DIVERSION: T10S R23E S27

SWNWSE

Within CASSIA County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE
DOMESTIC 1 HOME

PERIOD OF USE
01-01 12-31

QUANTITY
0.04 CFS

PLACE OF USE:

DOMESTIC
T10S R23E S27

Within CASSIA County
SWNW

NWSE

as per original claim
x 1/9/98

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. 000250010110

Claim proofread by: CL

Date: 9.29

IDAHO
DEPARTMENT OF WATER RESOURCES

Orchard Street, P.O. Box 83720
83720-0098

SERVICE REQUESTED

POSTED
FIRST CLASS

MAR 2 '98

U.S. POSTAGE

0.23

IMPORTANT WATER RIGHT INFORMATION

3/4

45-11858

DENNIS CLAUNCH
LORNA CLAUNCH
RT 1
407 HILLCREST
BURLEY ID 83318

NOT DELIVERABLE
TO ADDRESSEE

70 Vista Ln.

RECEIVED

MAR 05 1998

Department of Water Resources

83318=2700

|||||

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: A45-11858
Date Received: 6/08/1989
Receipt No: S008568
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DENNIS CLAUNCH 208-678-4425
Address: RT. 1, 407 HILLCREST
BURLEY, ID 83318

OR
Name: LORNA CLAUNCH 208-678-4425
Address: RT. 1, 407 HILLCREST
BURLEY, ID 83318

2. Date of Priority: NOV 10, 1986

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	27	SW	NW	SE		CASSIA

5. Description of diverting works:
WELL & 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 (FUTURE)

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	23E	27	SW	NW		DOMEST	
			SW	NW		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:
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. A45-11858Date Received 6-8-89Receipt Number 5008568 *Sc*RECEIVED
JUN 8 1989
Department of Water Resources
Southern Region Office
**NOTICE OF CLAIM
TO A
WATER RIGHT**

RECEIVED

JUL 14 1989

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day.

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Dennis Claunch or Lorna Claunch Phone (208) 678-4425Mailing Address Rt. 1 407 Hillcrest Burley, Id Zip 833182. Date of Priority (Only one per claim) Nov. 10, 1986 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 South Range 23 EASTSection 27, SW 1/4 of NW 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.

Well + Pump

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

	Month/Day	Month/Day	(cfs)
For <u>Domestic</u> purposes from <u>1-1</u> to <u>12-31</u> amount <u>0.04</u>			
(Both dates are inclusive)			
For <u>Livestock</u> purposes from <u>1-1</u> to <u>12-31</u> amount <u>0.02</u>			

7. Total quantity claimed 0.06 (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) ONE HOUSE AND TWO HORSES FOR FURNACE

TWO

MICROFILMED

MAR 10 1993

10. Place of use is: Township: 10 South Range 23 East
Section 27, SW 1/4 of NW 1/4, Govt Lot SE, 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 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 ()
Burley Irrigation District

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 X

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Dennis Claunch Date 6-7-89

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 7th day of JUNE 19 89

SEAL

Notary Public James M. Hill

Residing at Burley, ID

My Commission Expires 8-23-92

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

R. KEITH HIGGINSON
Director

June 23, 1989

Dennis or Lorna Claunch
Rt. 1407 Hillcrest
Burley, ID 83318

RE: SRBA Claim

Dear Claimant:

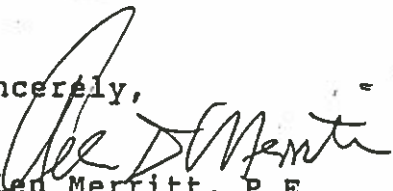
Please find enclosed your claim and your check # 243 for
\$ 25.00 which you submitted to our office. I am returning
these pursuant to Rule 10,4 of the Department's Adjudications Rules and
Regulations. In checking your claim it appears that the following
items need clarification:

- ☐ Item #2 Priority
- ☒ 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

Please indicate $\frac{1}{4}$ $\frac{1}{4}$ descriptions.

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.

Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

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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. 23, 1989

Re: A45-11858

DENNIS CLAUNCH
RT 1 407 HILLCREST
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 dark ink, appearing to read 'Judy'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 10 1993

PREFIX TRANSLATION: ADJUDICATION CLAIM

CERTIFIED
DEC 23 1991
WATER EXAMINER