

COPY

1999 NOV 19 PM 12: 46

DISTRICT COURT - SRBA
TWIN FALLS CO., IDAHO

FILED _____

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re SRBA

Case No. 39576

) NOTICE OF COMPLETED
) ADMINISTRATIVE PROCEEDINGS
)
)
)

SUB CASE NO. 37-10261, 37-10262

IDWR has completed the following Administrative proceeding: **SUBSTITUTION OF PARTY**

Does the change in "ownership" result in a splitting of the water right claimed? ☐ Yes ☒ No

FROM: Claimant/Seller(s):

Name and Address of Claimant/Seller(s):

Louis L Hubsmith

Darlene I Hubsmith

PO Box 397

Dietrich ID 83324

Phone:

TO: Claimant/Purchaser(s):

Name and Address of Claimant/Purchaser(s):

Louis L Hubsmith

Iris B Hubsmith

647 E 130 S

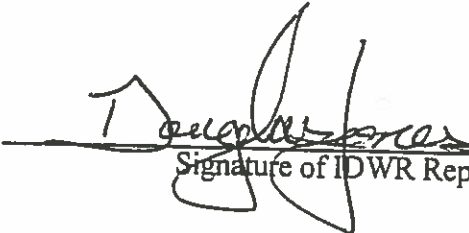
Dietrich ID 83324

Phone: 544-7581

IDWR certifies that it has completed its investigation into the changes to the elements of the water rights listed above as set forth in the attached *Amended Director's Reports* for said water rights. No other changes have been made to the elements of these water rights except as set forth above.

IDWR has served copies of the *Notice of Completed Administrative Proceeding* and *Amended Director's Report(s)* on the claimant(s), prior claimant(s) and all parties in the subcases affected, if any, as reflected on the attached certificate of mailing.

DATED: 11/5/99


Signature of IDWR Representative

CERTIFICATE OF MAILING

I certify that on 11/19, 1999, I mailed the original and copies of this form to the following persons, postage prepaid and addressed as follows:

1. Original to:
Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls ID 83303-2707
2. One Copy to:
Claimant/Seller for Substitution of Party or attorney of record:
Louis L Hubsmith
Darlene I Hubsmith
PO Box 397
Dietrich ID 83324
3. One Copy to:
Claimant/Purchaser for Substitution of Party or attorney of record:
Louis L Hubsmith
Iris B Hubsmith
647 E 130 S
Dietrich ID 83324
4. One Copy to:
Each party in the subcase or attorney of record:
5. One Copy to:
Chief Natural Resources Division
Office of the Attorney General
PO Box 44449
Boise ID 83711-4449
6. One Copy to:
United States Dept Of Justice
Environment & Natural Resource Div
550 West Fort Street MSC 033
Boise ID 83724


Signature of person or attorney mailing the form

AJ5856NP

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

DATE: OCT-25-1999
PAGE: A-1

RIGHTS FROM: SOURCE: GROUNDWATER

RIGHT NUMBER: 37-10261

NAME & ADDRESS: LOUIS L HUBSMITH
IRIS B HUBSMITH
647 E 130 S
DIETRICH ID 83324

SOURCE: GROUNDWATER

QUANTITY: 0.09 CFS

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

PRIORITY DATE: 06/01/1920

POINT OF DIVERSION: T06S R19E S30 Lot 11 (SESWSW)

Within LINCOLN County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE
STOCKWATER
DOMESTIC 1 HOME

PERIOD OF USE
01-01 12-31
01-01 12-31

QUANTITY
0.05 CFS
0.04 CFS

PLACE OF USE:

STOCKWATER Within LINCOLN County
T06S R19E S19 Lot 11 (SWSW)

DOMESTIC Within LINCOLN County
T06S R19E S19 Lot 11 (SWSW)

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. 06S19E194801
STOCKWATER, 150 RANGE

AJ5856NP

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

DATE: OCT-25-1999

PAGE: A-2

RIGHTS FROM: SOURCE: GROUNDWATER

RIGHT NUMBER: 37-10262

NAME & ADDRESS: IRIS B HUBSMITH
LOUIS L HUBSMITH
647 E 130 S
DIETRICH ID 83324

SOURCE: GROUNDWATER

QUANTITY: 0.09 CFS

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

PRIORITY DATE: 06/01/1920

POINT OF DIVERSION: T06S R18E S11 SESENE Within LINCOLN County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.05 CFS
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE:	STOCKWATER	Within LINCOLN County
	T06S R18E S11	SENE
	DOMESTIC	Within LINCOLN County
	T06S R18E S11	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. RPO6S18E111200A
STOCKWATER, 150 RANGE



State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037

SOUTHERN REGION

November 17, 1999

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

LOUIS HUBSMITH
IRIS HUBSMITH
647 E 130 S
DIETRICH ID 83324

RE: SRBA Claim(s) 37-10261, 37-10262

Dear Claimant:

Please find the enclosed copy of the Notice of Completed Administrative Proceeding, which the department has filed with the SRBA Court regarding the above referenced claims. You have received this notice pursuant to SRBA Court Administrative Order 11 requiring IDWR to report to the court and interested parties any pending changes to adjudication claims in basins for which a Director's Report has been filed with the court.

Please contact this office if you have any questions about the notice or the administrative process.

Sincerely,

Trish Fawcett
Technical Records Specialist

RECEIVED

JUL 22 1999

Department of Water Resources
Southern Region

STATE OF IDAHO

IDAHO DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

1. Water Right No(s): 37-07268, 08679
Adjudication Claim No(s): A37-07454, 07602, 10261, 10262
2. The following **REQUIRED** information must be submitted with this form:
 - A. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water rights or claims in question, **WITH ATTACHED LEGAL DESCRIPTION.**
 - AND
 - B. **PLAT OF PROPERTY** or **SURVEY MAP** showing the location of the place of use of the water right(s) or claim(s). (These are usually attached to your deed or on file with the county.)
 - OR
 - C. If your water right or adjudication claim is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.
3. Name and Address of Former Owner/Claimant Louis L. & Darlene I. Hubsmith (Deceased)
4. New Owner/Claimant(s) Louis L. & Iris B. Hubsmith
New Mailing Address 647 E 130 S
City, State and ZIP Code Dietrich, ID 83324
New Telephone Number () 544-7581
5. Date you acquired the property Wife died Oct. 9, 1988, remarried April 8, 1989
6. Did you acquire all of the former owner's property? If you did, skip this item and go to item 7. If you acquired only a portion of the former owner's property, IDWR may need to split the water right(s) or adjudication claim(s). Describe in detail your portion of each water right or adjudication claim in the spaces in the box below only if the water right(s) or claim(s) need to be split between owners. If necessary, attach additional pages. If a water right or adjudication claim is being split and you are not sure how to identify your portion of the original right or claim, please contact the nearest IDWR office for assistance.

Number of acres you irrigate with this water right _____	Number and type of stock _____
Diversion rate in CFS _____	Number of homes you acquired _____ Other uses _____

7. Signature of New Owner(s) or Claimant(s) Louis L. Hubsmith

Corporations or other organizations must submit a list of directors and/or officers demonstrating authority to sign form.

8. For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims.

O/C 9/20/99 CT
IDF

State of Idaho CERTIFICATE OF DEATH

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR, WITH THE DEPT. OF HEALTH & WELFARE RAISED SEAL, SHALL BE USED AS PRIMA FACIE EVIDENCE OF THIS DEATH UNDER IDAHO CODE 30-211(a) & 30-27A

State File No. _____
Local Reg. No. 052

DECEDENT		DECEDENT - NAME - FIRST		MIDDLE	LAST	SEX	DATE OF DEATH (Mo., Day, Yr.)
		DARLENE		IDA	HUBSMITH	Female	Oct. 9, 1988
TYPE OR PRINT IN PERMANENT BLACK INK DO NOT USE FELT TIP PEN		RACE - (White, Black, American Indian, Japanese, etc.)		AGE - Last Birthday (Yrs.)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (Mo., Day, Yr.)
		White		54	7	25	February 14, 1934
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION - Name (If not in ethnic give street and number)		IF HOSP. OR INST. Indicate DOA, OPER. Rm., Inpatient (Specify)		COUNTY OF DEATH	
Hailey		Blaine Co. Medical Center		Inpatient		Blaine	
STATE OF BIRTH (If not in U.S.A. name country)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)		SURVIVING SPOUSE (If wife, give maiden name)	
Idaho		USA		Married		Leon Hubsmith	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (One kind of work done during most of working life, even if retired)		KIND OF BUSINESS OR INDUSTRY		WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No)	
528-44-9114		Housewife		Home		No	
RESIDENCE STATE		COUNTY		CITY, TOWN OR LOCATION		STREET AND NUMBER	
Idaho		Lincoln		Dietrich		---	
INSIDE CITY LIMITS (Yes or No)		FATHER - NAME		BIRTHPLACE		MOTHER - MAIDEN NAME	
NO		Vernon F. Perron		Idaho		Hazel Johnson	
INFORMANT - NAME		MAILING ADDRESS		STREET OR R.F.D. NO.		CITY OR TOWN	
Leon Hubsmith		Dietrich, Idaho 83324		STATE		ZIP	
DISPOSITION		BURIAL, OUT-OF-STATE REMOVAL, CREMATION, ENTOMBMENT, OTHER (Specify)		DATE		CEMETERY OR CREMATORY - NAME	
Burial		10-12-1988		Shoshone Cemetery		Shoshone, Idaho	
MORTICIAN (Signature)		LICENSE NO.		NAME OF FACILITY		ADDRESS OF FACILITY	
M-463		Bergin Funeral Chapel		Shoshone, Idaho 83352		ZIP	
CERTIFIER		21a. I hereby certify that I attended the decedent from 10/9/88 to 10/9/88		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated.		(Coroner's Signature)	
IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE		I last saw the decedent alive on 10/9/88 To the best of my knowledge.		DATE SIGNED (Mo., Day, Yr.)		HOUR OF DEATH	
		death occurred at the time, date and place and due to the cause(s) stated.		22b. PRONOUNCED DEAD (Mo., Day, Yr.)		PRONOUNCED DEAD (Hour)	
		(Signature and Title) [Signature]		22c. ON		22d. AT	
		DATE SIGNED (Mo., Day, Yr.) 10/22/88		HOUR OF DEATH 22:20			
		NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR CORONER) (Type or Print)					
		Donald Levin, M.D., 21 East Maple, Hailey, Idaho 83330					
		REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)			
		Betty J. Nelson		October 31, 1988			
CAUSE OF DEATH		25. PART I Enter Only One Cause Per Line For (a), (b), (c) IMMEDIATE CAUSE		Interval between onset and death			
		(a) resp. cto. of aortic		4			
		(b) overwhelming sickle cell sepsis.		72 hrs.			
		(c) Bone marrow suppression 27 chemo therapy, stem cell transplant		4 wks.			
		PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in PART I (a), (b), (c)		AUTOPSY (Yes or No)			
				No			
TO BE USED FOR EXTERNAL CAUSES ONLY		ACC. SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY	
						DESCRIBE HOW INJURY OCCURRED	
		INJURY AT WORK (Yes or No)		IF TRANSPORTATION ACCIDENT, Specify		PLACE OF INJURY - As home, farm, street, factory, office building, etc. (Specify)	
				Driver Passenger Pedestrian		LOCATION STREET OR R.F.D. NO. CITY/TOWN OR COUNTY	
				Other		ZIP	

HWH-0128
Revised 2-88

*At a minimum, complete items 1, 2, 3, 7a, b, c, d.

(STATE OF IDAHO)
(County of Twin Falls)

THIS IS TO CERTIFY that this is a true copy of a death certificate filed with the Idaho Department of Health and Welfare under Title 39, Idaho Code. The local Deputy State Registrar in the South Central District Health Department issued this copy with local registration number affixed under authority granted to the State Registrar (IDAPA 16.02.8150.02b). Copies of this certificate made at a later date may reflect legal amendments made subsequent to this issuance.

NOT VALID WITHOUT RAISED SEAL OF IDAHO STATE DEPARTMENT OF HEALTH AND WELFARE

October 31, 1988
Date Issued

Clair L. Nelson
State Registrar of Vital Statistics

MARRIAGE LICENSE No 46702

The State of Utah

County of Salt Lake

To Any Person Legally Authorized to Solemnize Marriage, Greeting:

You are Hereby Authorized to Join in Holy Matrimony

Mr. LOUIS LEON HUBSMITH, of DISTRICH
in the County of LINCOLN and State of IDAHO over the age of 56 years, and
M IRIS BEATRIX EHRSAM, of SALT LAKE CITY
in the County of SALT LAKE and State of UTAH over the age of 39 years.

Witness my hand and official seal 21st day of APRIL 1989

H. DIXON HINDLEY County Clerk, Salt Lake County, Utah

By Nancy L. Everett Deputy Clerk.

STATE OF UTAH }
County of CACHE ss.

I hereby certify that on the 28th day of APRIL in the

year of our Lord one thousand nine hundred 89 at LOGAN, in said CACHE County,

I, the undersigned, a Member of the Church of Jesus Christ of Latter-Day Saints did join in the Holy Bonds of Matrimony

according to law LOUIS LEON HUBSMITH of the County of LINCOLN
State of IDAHO and IRIS BEATRIX EHRSAM of the County of

SALT LAKE State of UTAH. The nature of the ceremony was according to

the Church of Jesus Christ of Latter-Day Saints, and was a present mutual agreement of marriage between the parties

for all time.

SIGNATURE OF PARTIES INVOLVED IN MARRIAGE

Groom Louis Leon Hubsmith
1st Name 2nd Name Last Name

Bride Iris Beatrix Ehsam
1st Name 2nd Name Maiden Prev. Married

Roy E. Hubert Roy E. Hubert 1st Witness

Arthur R. Hubsmith Arthur R. Hubsmith 2nd Witness

William E. Watkins
Signature of Person Performing Marriage

Elder of the Church of Jesus Christ of Latter-Day Saints

Title Position Held

We give our permission for release of information on application and license

TO PARTIES PERFORMING MARRIAGES: It is the duty of the person celebrating marriage to fill out and sign the license and the bottom portion of the application both are to be returned to the office of County Clerk within 30 days. Anyone failing to do so is liable to a fine of \$100.00.

Attn: Jim Stenton

Thanks Again
Leon

AJ5856NP

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

DATE: OCT-24-1997
PAGE: A-124

RIGHT NUMBER: 37-10261

NAME & ADDRESS: DARLENE I HUBSMITH
LOUIS L HUBSMITH
PO BOX 397
DIETRICH ID 83324

SOURCE: GROUNDWATER

QUANTITY: 0.09 CFS

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

PRIORITY DATE: 06/01/1920

POINT OF DIVERSION: T06S R19E S30 LOT 11 (SESWSW) Within LINCOLN County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.05 CFS
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within LINCOLN County
T06S R19E S19 Lot 11 (SWSW)

DOMESTIC Within LINCOLN County
T06S R19E S19 Lot 11 (SWSW)

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. 06S19E194801
STOCKWATER, 150 RANGE

Claim proofread by: 

Date: 

OCT 31 1997

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: A37-10261
Date Received: 6/24/1988
Receipt No: S000529
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: LOUIS L. HUBSMITH 208-544-7581
Address: P. O. BOX 397
DIETRICH, ID 83324

AND/OR
Name: DARLENE I. HUBSMITH
Address: DIETRICH, ID 83324

2. Date of Priority: JUN 01, 1920

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06S	19E	30	SE	SW	SW	11	LINCOLN

5. Description of diverting works:
6" X 300' WELL, 1.5 HP PUMP, STOCK TROUGHS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.050		
DOMESTIC	01/01	12/31	0.040		

7. Total Quantity Appropriated is:
0.090 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
DOMESTIC/1 HOME; STOCK/150 RANGE

A37-10261

Page 1

Date: 06/24/88

MICROFILMED
FEB 24 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06S	19E	19	SW	SW	11	STOCK	
			SW	SW	11	DOMEST	

11. Place of use in counties: LINCOLN

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
STOCK ALSO DRINK FROM CANAL

14. Remarks:

15. Basis of Claim: BENEFICIAL USE
Water Right Number:

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 X 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): *Joan L. Hulsrich* Date: *24 June 88*
_____ Date: _____

State of Idaho)
County of *Blaine Falls*) SS.

Subscribed and sworn (or affirmed) before me this *24th* day
of *June* 19 *88*

Mary A. Baldwin
Notary Public

Seal

Residing at *Looding, Id*
My Commission Expires *10/16/1992*

OLD (D) NUMBER -

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

STATE- ID ZIP- 83324

STATE- ID ZIP- 83324

DARLENE I.

+ - - - STATUS - - - - +

+ - - - - - TRIBUTARY - - - - - +

STREAM INDEX (BLANK IF NO INDEX CODE)

01/01 12/31

(63) LINCOLN

(63) LINCOLN

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

MICROFILMED
OCT 25 1994

WATER RIGHT NUMBER - A37-10261

PREFIX TRANSLATION: ADJUDICATION CLAIM

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

+ - - - - DECREE PLAINTIFF - - - + + - - - - DECREE DEFENDANT - - - + + - DECREE DATE - +
00/00/0000

+ - - AUDIT FIELDS - 06/24/88 STANTON 09/26/89 REFUNDML

+ - - - - 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	- 06/27/1988	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	- S000534	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	- AND/OR	NOTICE OF ERROR FLAG	-

065196194801

DATA ENTRY
ENTERED 11-3-93 *PS*
CHECKED 2/4/94 *DLD*

"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
FEB 12 1992

CERTIFIED
MAR 22 1992
WATER EXAMINER