

Boards

AJ5856NP

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

DATE: SEP-19-1997

PAGE: A-57

RIGHT NUMBER: 37-11738

NAME & ADDRESS: JUDY K MCLEAN
PO BOX 4750
KETCHUM ID 83340

*Box 1125
Hailey 83333*

SOURCE: GROUND WATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 05/01/1955

POINT OF DIVERSION: T04N R17E S15 SWSNW Within BLAINE County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1/DOMESTIC HOUSEHOLD <i>(1 home)</i>	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within BLAINE County
T04N R17E S15 SENW

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

who add to?

*n11
n13*

✓ 8/2/9/99

*Location probable
per Dwp map
& page 1809 Blaine
Chrl*

Verified by _____ Date: _____

Verification Source: _____

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: A37-11738
Date Received: 11/10/1988
Receipt No: M001640
Received By: AS

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JUDY K. MCLEAN 208-726-5607
Address: P.O. BOX 4750
KETCHUM, ID 83340

2. Date of Priority: MAY 01, 1955

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
04N	17E	15	SW	SE	NW		BLAINE

5. Description of diverting works:
WELL 25 FEET DEEP

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:
1/DOMESTIC HOUSEHOLD

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
04N	17E	15	SE	NW		DOMEST	

11. Place of use in counties: BLAINE

A37-11738

Page 1

Date: 11/10/88

MICROFILMED
FEB 25 1993

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 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 A37-11738

Date Received _____

Receipt Number MOO1640

NOTICE OF CLAIM
TO A
WATER RIGHT

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) Judy K. McLEAN Phone 208 726-5607
Mailing Address P.O. Box 4750 Ketchum Id Zip 83340

2. Date of Priority (Only one (1) per claim) 5-1-1955

3. Source of water supply (a) Groundwater
which is tributary to (b) _____

4. Location of point of diversion is: Township 4N Range 17E
Section 15, SW 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, B.M.,
County of BLAINE

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, 25' deep

6. Water is claimed for the following: (Limited to Domestic and/or Stockwater only. See Instructions)
(Both dates are inclusive) (cfs)
For Dom purposes from 01-01 to 12-31 amount .04
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .04 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of livestock) ONE DOMESTIC HOUSEHOLD

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Copies: White-Store, Yellow-Claimant

10. Place a "D" for domestic and "S" for stockwater use in the corresponding place of use below.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
4N	17E	15								D								

11. In which county (ies) are lands listed above as place of use located? BLAINE

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.
_____ or None ☒

14. Remarks: _____

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____
Decree _____

If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

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

Signature of Claimant (s) *July K. Hoyle* Date 10-14-88

Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
document in the space below as _____ Organization _____
Title _____ of _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/☒)
County of Blaine) SS.

Subscribed and sworn (or affirmed) before me this 14th day of October 19 88

SEAL

Notary Public *Melvin Eugene Gibson*

Residing at Boise, 2d

My Commission Expires 9-2-1994

Last Name _____ Ident No. _____

MICROFILMED
FEB 25 1993