

AJ5856NP

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

DATE: OCT-24-1997

PAGE: A-1198

RIGHT NUMBER: 37-12288

NAME & ADDRESS: RICHARD G LINDSLEY
CAROLYNN G LINDSLEY
1530 26TH ST
OGDEN UT 84401

SOURCE: GROUNDWATER

QUANTITY: 0.05 CFS

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

PRIORITY DATE: 01/01/1980

POINT OF DIVERSION: T04N R17E S13 NENENW Within BLAINE County

PURPOSE AND

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

PLACE OF USE: DOMESTIC Within BLAINE County
T04N R17E S13 NENW

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. RPK05500060050A

7-29-98

Claim proofread by: WW

Date: 1103

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: A37-12288
Date Received: 1/26/1989
Receipt No: C004005
Received By: lw

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CAROLYNN G. LINDSLEY 801-394-9751
Address: 1530 26TH ST
OGDEN, UT 84401

AND/OR

Name: RICHARD G. LINDSLEY 801-394-9751
Address: 1530 26TH ST
OGDEN, UT 84401

2. Date of Priority: JAN 01, 1980

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
04N	17E	13	NE	NE	NW		BLAINE

5. Description of diverting works:
100'X6" WELL

6. Water is used for the following purposes:

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

7. Total Quantity Appropriated is:
0.050 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
04N	17E	13	NE	NW		DOMEST	

11. Place of use in counties: BLAINE

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

13. Other Water Rights Used:
NONE

14. Remarks:
LT 5, BLK 6, SUN VALLEY SUBD, 1ST ADDITION REVISED

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: 137-12288 89576

Ident. Number

Date Received

Receipt Number C004005

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

Department of Water Resources
Southern Region Office

RECEIVED

OCT 27 1988

Please type or print clearly

1. Name of Claimant (s) Carolynn G. Lindsley and/or Richard G. Lindsley Phone (801) 394-9751

Mailing Address 1530 26th Street Ogden, Utah Zip 84401

2. Date of Priority (Only one (1) per claim) 1/1/1980

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

4. Location of point of diversion is: Township 4N Range 17E

Section 13, NE 1/4 of NE 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 with 6" hole approximately 100' deep no recent modifications

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

(Both dates are inclusive) (cfs)
For Domestic purposes from 1/1 to 12/31 amount 0.05 cfs

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.05 (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) 1 Household served

MICROFILMED

Copies: White Stock, 1993-Claimant
FEB 28 1993

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	13					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 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.
_____ or None (X)

14. Remarks: Lot 5 Block 6 of Sun Valley Subdivision 1st Addition Revised

15. Basis of Claim (check one) Beneficial Use X 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 X do not X
wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 0

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

Signature of Claimant (s) *Norah B. Dinsley*

Date 11/25/88

Date _____

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

Title

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 _____

Title and Organization _____

Date _____

State of Idaho/or _____)

County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this

24th day of October 19 88

SEAL

Notary Public *Sharon A. Grouser*

Residing at Twin Falls Idaho

My Commission Expires 12/1/88

Last Name LINDSLEY

Ident No. _____

Copies White State, Yellow Defendant
FEB 26 1993

12/03/91 02:44:11
PAGE 1

OLD (D) NUMBER -

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

PHONE - 801-394-9751

+ - - - STATUS - - - - +

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

(13) BLAINE

MICROFILMED
OCT 26 1994

CERTIFIED
MAR 27 1992
WATER EXAMINER