

RIGHT NUMBER: 37-12293

NAME & ADDRESS: CHARLES W HOLT  
LYN S HOLT  
BOX 511  
SUN VALLEY ID 83353*Ralph Campanale II*  
*Box 3778*  
*Ketchum ID 83340*

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 09/19/1977

POINT OF DIVERSION: ~~T03N~~ <sup>4N</sup> R18E S31

SESE ✓

Within BLAINE County

PURPOSE AND

PERIOD OF USE: PURPOSE OF USE  
DOMESTIC D/I HOUSEPERIOD OF USE  
01-01 12-31QUANTITY  
0.04 CFS

PLACE OF USE:

DOMESTIC <sup>4N</sup>  
~~T03N~~ R18E S31Within BLAINE County  
SESE ✓

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

LT 9, SUBD 9 GIMLET

*202 Sutton Place*

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

*RP 002300000090*Verified by *[Signature]*Date: *11-17-98*Verification Source: *City Parcel Pkts 91+98 + map*



# 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

August 3, 1989

Charlotte Holt / Kenney Johnson  
Box 511  
Sun Valley, ID 83353

RE: SRBA CLAIM

A-47-07137  
A 37-12648 ✓  
12293

DEAR CLAIMANT:

PLEASE FIND ENCLOSED YOUR ADJUDICATION CLAIM AND YOUR CHECK # \$25 credit FOR \$\_\_\_\_\_. YOU ARE GIVEN THE OPPORTUNITY TO WITHDRAW THIS CLAIM AS ORIGINALLY FILED. ANY WATER RIGHT DEVELOPED AFTER 3/15/1963, FOR ANY USE OTHER THAN SINGLE FAMILY DOMESTIC USE AND OR STOCKWATER USING 13,000 GALLONS PER DAY OR LESS, IS REQUIRED TO HAVE AN APPLICATION FOR PERMIT FILED. THIS INCLUDES USES SUCH AS IRRIGATION OF OVER 1/2 ACRE OR DOMESTIC USE FOR A COMMERCIAL BUSINESS.

SINCE WE CAN FIND NO RECORD OF A PERMIT OR LICENSE FOR THE USE YOU DESCRIBE, THE DEPARTMENT, IN ITS FINAL REPORT TO THE COURT, WOULD BE FORCED TO RECOMMEND THAT YOUR CLAIM BE REJECTED.

AT THIS POINT PLEASE CONSIDER THE FOLLOWING OPTIONS:

RETURN THE CLAIM AS FILED UNDERSTANDING THAT THE DEPARTMENT WILL RECOMMEND THE CLAIM REJECTED. UPON REJECTION YOU CAN PURSUE LITIGATION.

RECORD THE USE NOW BY FILING FOR AN APPLICATION FOR PERMIT. (PLEASE CONTACT OUR OFFICE FOR FORMS, INSTRUCTIONS OR ASSISTANCE)

FILE MODIFIED CLAIM OR CLAIMS WHICH WOULD PROPERLY RECORD YOUR USE. FOR EXAMPLE, IF YOUR USE IS MULTIPLE DOMESTIC YOU COULD FILE MULTIPLE CLAIMS EACH MEETING THE SINGLE FAMILY DOMESTIC DEFINITION. BUT BEFORE RETURNING SUCH CLAIMS PLEASE READ THE ENCLOSED DRAFT TEXT FOR D&S BROCHURE. DUE TO A RECENT COURT RULING YOU MAY DEFER FILING SUCH CLAIMS.

*File long form for commercial use since claim represents mult. domestic and the well was drilled before 1963.*

IF YOU CHOOSE TO FILE ADJUDICATION CLAIMS, YOU WILL NEED TO RETURN THEM WITH THE CORRECT FEE WITHIN 30 DAYS FROM THE DATE OF THIS LETTER OR THE CLAIMS WILL BE CONSIDERED LATE AND EACH SUBJECT TO ADDITIONAL LATE FEES WHICH COULD BE \$50 OR MORE. IN RETURNING CLAIMS PLEASE ATTACH A COPY OF THIS LETTER. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.

SINCERELY,

*Lori White*

LORI WHITE  
SR. WATER RESOURCE AGENT

ENCL:

*Form + instruction enclosed*

*Fee = 50 + 100 per cts  
50 + 4 = 54  
Credit 25*

NOV 27 1989  
*29 du with form*

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: A37-12293  
Date Received: 1/26/1989  
Receipt No: C003999  
Received By:     

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name: CHARLES W. HOLT 208-726-5176  
Address: BOX 511  
SUN VALLEY, ID 83353

AND/OR

Name: LYN S. HOLT 208-726-5176  
Address: BOX 511  
SUN VALLEY, ID 83353

2. Date of Priority: SEP 19, 1977

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County |
|----------|-------|---------|--------|--------|-----|-----|--------|
| 03N      | 18E   | 31      | SE     | SE     |     |     | BLAINE |

5. Description of diverting works:  
78'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 | 0.040  |      |        |

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:  
D/1 HOUSE

A37-12293

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Date: 01/26/89

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FEB 26 1993

10. Place of Use:

| Township | Range | Section | 1/4 of 1/4 | Lot | Use    | Acres |
|----------|-------|---------|------------|-----|--------|-------|
| 03N      | 18E   | 31      | SE SE      |     | 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 9, SUBD 9 GIMLET

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 A37-12293

Date Received \_\_\_\_\_

Receipt Number C003999

RECEIVED

OCT 27 1988

NOTICE OF CLAIM  
TO A  
WATER RIGHT

Department of Water Resources  
Southern Region Office

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) CHARLES W. & LYN S. HOLT Phone (208) 724-5176Mailing Address Box 511 Sun Valley Id Zip 833532. Date of Priority (Only one (1) per claim) 9/19/773. Source of water supply (a) WELL - GROUNDWATER  
which is tributary to (b) \_\_\_\_\_4. Location of point of diversion is: Township 3 NORTH Range 18 EASTSection 31 1/4 of SE 1/4 of SE 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 - 6" CASING  
Depth = 78'

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 JAN 1 to Dec 31 amount .04

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

7. Total quantity claimed .04 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of  
livestock) DOMESTIC - one household

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Copies: Idaho State Records Commission  
FEB 26 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 |
| 3N  | 18E | 31  |        |       |       |       |        |       |       |       |        |       |       |       |        |       |       | 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: LOT 15 = LOT 9 SUBDIVISION 9 GIMLET  
BLAINE COUNTY

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) [Signature]

Date 10-25-88

Date 10/25/88

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 \_\_\_\_\_

Title and Organization \_\_\_\_\_

Date \_\_\_\_\_

State of Idaho/or \_\_\_\_\_ )  
County of Blaine ) SS.

Subscribed and sworn (or affirmed) before me this 25<sup>th</sup> day of October 19 88

SEAL

Notary Public Susan D Carlson

Residing at Hailey, Idaho

My Commission Expires March 28, 1993

Last Name HOLT

Ident No. \_\_\_\_\_

Copies White State Yellow Plaintiff

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**FEB 26 1993**