

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: A37-12940
Date Received: 3/24/1989
Receipt No: S006657
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOEL PHILIP NIELSEN
Address: 2704 BRIARWOOD DR.
LIVERMORE, CA 94550
209-836-5637

2. Date of Priority: JUN 01, 1980

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
02N	18E	5	NE	NE	NE		BLAINE

5. Description of diverting works:
COMMUNITY WELL WITH PIPELINES TO 16 LOTS INCLUDING CLAIMANT'S

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 DOMESTIC

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
02N	18E	5	NE	NE		DOMEST	

11. Place of use in counties: BLAINE

A37-12940

Page 1

Date: 04/25/89

MICROFILMED
MAR 01 1993

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

13. Other Water Rights Used:
NONE

14. Remarks:

I OWN LOT 13 WHICH IS ONE OF 16 LOTS ON THE COMMUNITY WELL.
P/U IS LOT 13 OF FLYING HEART RANCH II.

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 _____

Mail this card to all the people, businesses and publications who send you mail. For publications, tape an old address label over name and old address sections and complete new address.

MICROFILMED

MAR 01 1993

Your Name	Print or Type—Last Name, First Name, Middle Initial NIELSEN JOEL				
Old Address	No. and Street 16298 Von Sostem		Apt./Suite No.	P.O. Box	R.D. No.
	City and State TRACY CA.		ZIP Code 94539		
New Address	No. and Street 2704 BRIARWOOD DR.		Apt./Suite No.	P.O. Box	R.D. No.
	City and State Livermore CAL.		ZIP Code 94550		
Sign Here	Signature [Signature]		Date new address in effect 2/1/89		Account No. (if any)

PS FORM 3576 RECEIVER: Be sure to record the above new address in your address book at home or office.

attached to 37-12940

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Receipt No: S006657
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOEL PHILIP NIELSEN 209-836-5637
Address: 16298 VON SOSTEN ROAD
TRACY, CA 95376

2. Date of Priority: JUN 01, 1980

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
02N	18E	5	NE	NE			BLAINE

5. Description of diverting works:
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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 DOMESTIC

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
02N	18E	5	NE	NE		DOMEST	

11. Place of use in counties: BLAINE

A37-12940

Page 1

Date: 03/24/89

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MAR 01 1993

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

13. Other Water Rights Used:
NONE

14. Remarks:
I OWN LOT 13 WHICH IS ONE OF 16 LOTS ON THE COMMUNITY WELL.
P/U IS LOT 13 OF FLYING HEART RANCH II.

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

A37-12940

Date Received

5006655

Receipt Number

AD

RECEIVED

MAR 23 1989

Department of Water Resources
Southern Region Office

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

RECEIVED

OCT 3 1988

Department of Water Resources
Southern Region Office

Please type or print clearly

1. Name of Claimant (s) JOEL PHILIP NIELSEN Phone (209) 836-5637Mailing Address 16298 Von SOSTEN RD. TRACY, Ca. Zip 953762. Date of Priority (Only one (1) per claim) SEPTEMBER 25, 19883. Source of water supply (a) GROUND WATER
which is tributary to (b) _____4. Location of point of diversion is: Township TWO North Range 18 EASTSection 5, NE 1/4 of NE 1/4 of _____ 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. COMMUNITY WELL WITH UNDERGROUND
PIPES STUBED INTO LOTS, WELL & PUMP IS SUFFICIENT TO SUPPLY
16 DOMESTIC USES, WELL PUT IN APPROX 6-1-80

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 1231 amount 0.04

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (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) 1- DOMESTIC

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MAR 01 1993

Copies: White-State, 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
2N	18E		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: I OWN LOT 13 WHICH IS ONE OF SIXTEEN (LOT 1 THRU LOT 16) LOTS ON A COMMUNITY WELL WITH WATER PIPED TO EACH LOT

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

If applicable provide IDWR Water Right Number COURT
Court _____ Case Number 39576 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 1

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

Signature of Claimant (s) Jac P. Nilsen Date 9-25-88

2nd Signature Jac P. Nilsen Date 3-20-89

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

of _____ Title _____
Organization _____, that I have signed the foregoing

document in the space below as _____ of _____
Title _____ Organization _____

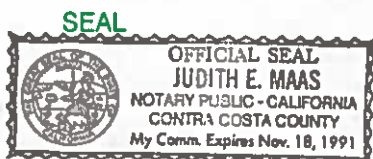
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of ~~Idaho~~ / or CALIFORNIA)
County of CONTRA COSTA) SS.

Subscribed and sworn (or affirmed) before me this 20th day of March 19 89



Notary Public Judith E Maas

Residing at 4485 Hook Maple Ct., Concord CA 94521

My Commission Expires 11/18/91

Last Name MAAS Ident No. _____ Copies White-State, Yellow-Claimant

* SEE ATTACHED SHEET

DEPT OF WATER RESOURCES,

WHEN I BOUGHT LOT #13
PARCEL RP 001750000130 A IN
FLYING HEART RANCH II, BLAINE
CO. IDAHO. I HAD TO PAY
A PREMIUM PRICE BECAUSE
LOT #1 THRU LOT #16 HAS
A COMMUNITY WELL WHICH IS
LOCATED ON FLYING HEART RANCH.

ALSO LOT #1 THRU LOT #16
HAVE UNDERGROUND WATER PIPES
STUBED INTO OUR LOTS, WHICH WE
KEPT UP WITH DUES SINCE 1981.

RECEIVED

Joel P. Nicks

OCT 3 1988

Department of Water Resources
Southern Region Office

3-20-88

DEPT WATER RESOURCES

I HAVE MADE 5 PHONE CALLS
TO HAILEY IDAHO, & IT SEEMS THAT
EITHER NO ONE KNOWS WHEN THE
WELL @ FLY HEART RANCH WAS
FIRST USED, AND OR NO ONE
WILL RETURN MY CALLS. BRIAN
BALLARD (ATTORNEY) DID WATER
RIGHTS FOR FLY HEART RANCH
BUT WHEN I TALKED WITH
HIM THIS MORNING HE SAID
HE DIDN'T KNOW, SO I GUESS
MY GUESS AT 6/1/1980 WILL
HAVE TO BE USED OR BALLARD
PHONE # IS 726-5657 AC 208

Thank you Joel P. Nicks



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

Joel Philip Nielson
16298 Von Sosten Rd.
Tracy, CA 95376

FEB 24 1989

RECEIVED

MAR 23 1989

Department of Water Resources
Southern Region Office

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 1142 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:

- [X] Item #2 Priority - *Month/Day/Year when water first used.*
- [] Item #4 Point of Diversion Legal Description *From comment in item #5 it would appear priority is 6/1/1980.*
- [] Item #6 Uses descriptions
- [] Item #9 Description of Non-irrigation Uses
- [] Item #10 Place of Use Legal Description
- [X] Item #16 Signature & Notorization
- [] Improper fee (THE CORRECT FEE IS \$ _____)
- [] Other or Remarks

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.

BEFORE RETURNING THE CLAIM PLEASE READ THE ENCLOSED DRAFT TEXT FOR D&S BROCHURE. Due to recent rulings by the court you may defer filing the claim if you so desire but it is recommended by the Department that you continue to press your claim. If you have any questions contact our office.

Sincerely,

Allen Merritt
Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

SRBA CLAIM REVIEW ANALYSIS SHEET (D & S CLAIMS)

ITEM
NO.CHANGED ?
YES NO

1. Nielson "P" () - () ☒ ()
- 16298 Van Sostem Rd.
2. Tracy, CA 95376 () ()
3. (+ GROUNDWATER OR 3B. () (+
4. T 2N R 18E SEC 5, NW $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$, LOT ____ CO. Blaine ☒ ()
5. () ()
6. () ()
7. () ()
8. () ()
9. () ()
10. T 2N R 18E SEC 5, NE $\frac{1}{4}$ NE $\frac{1}{4}$, LOT ____ USE Domestic () (+
- T ____ R ____ SEC ____, ____ $\frac{1}{4}$ ____ $\frac{1}{4}$, LOT ____ USE ____ () ()
11. () ()
12. () ()
13. AXA 122 Aspen Lakes Drive, Hailey, ID () ()
14. () ()
15. () ()

FIELD INSPECTED BY A. Kenneth Dunn DATE 5/15/1990

COMMENTS:

"There is not a building or any visible water use"

"New address found by field examiner"

IDWR REVIEW AND DATA BASE MODIFICATION BY hht DATE 6/26/1990

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MAR 01 1993

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

- Permit No. A37-12940
1. Owner: Joel Philip Nielsen Phone No. 209 836 5637
Current Address: 2204 Briarwood Dr. Livermore Ca. 94550
2. Accompanied by: _____ EXAM. DATE: 5-15-90
Address: _____ Phone No. _____
Relationship to Permit Holder: _____
3. Source: Groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: _____
_____ ☐ Copies Attached
2. Other water rights with same point of diversion: _____
_____ ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. Diversion System Diagram: Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached

There is not a building or any visible
water use on this property

(Flying Heart Ranch II Lot 13)
122 Aspen Lakes Dr.

County Records show following address

16298 Van Sostem Rd

Tracy Cal. 95376

Recommend Denial

Scale: 1" = _____.

2. ☐ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required). ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).
☐ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater).

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System Description (continued)

3. Narrative: Description (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

☐ See Remarks on page 4 for continuation

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size

*Code to correspond with No. on map and aerial photo

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
		NW	NE	NE	5	2N	18E	Blaine	122 Aspen Lakes Dr. Hailey

6. Place(s) of Use:

Indicate Method of Determination

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
2N	18E	5	x																

Do not use this space

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date

2. Measurements:

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

2. Alternate Method for Checking Purposes:

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3)

: Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Amps x .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$ _____

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$ _____

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} =$ _____

2. Volume Calculations for Other Uses:

H. REMARKS AND OVERLAP REVIEW ANALYSIS

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use.		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
Totals:				

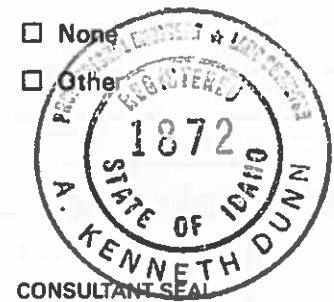
2. Recommended Amendments

- ☒ Change P.D. as reflected above ☐ Add P.D. as reflected above
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above

- ☐ None
☐ Other

J. AUTHENTICATION

Field Examiner's Name _____
Signature *A. Kenneth Dunn*
Certification Date 5-19-90
Field Report Preparation Date _____



- K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.