

AJ5856NP

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

DATE: OCT-24-1997
PAGE: A-1700

RIGHT NUMBER: 37-13397

NAME & ADDRESS: SHIRLEY PALUZZI
LINDA RAE SCROGGINS
TIMOTHY ROBERTS
18138 MERRILL
FONTANA CA 92335

✓

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 07/11/1974

POINT OF DIVERSION: T02N R18E S09 NENSW Within BLAINE County

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

PLACE OF USE: DOMESTIC Within BLAINE County
T02N R18E S09 NWSW

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. 02N180092820A
PROPERTY ALSO KNOWN AS 137 LITTLE INDIO LN

Am

D7-29-78

MH

11-3

Claim proofread by: _____

Date: _____

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: A37-13397
Date Received: 10/04/1990
Receipt No: S012725
Received By: SC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SHIRLEY. PALUZZI 208-822-3576
Address: 18138 MERRILL
FONTANA, CA 92335
AND/OR
Name: LINDA RAE SCROGGINS 208-822-3576
Address: 18138 MERRILL
FONTANA, CA 92335
AND/OR
Name: TIMOTHY ROBERTS 208-822-3576
Address: 18138 MERRILL
FONTANA, CA 92335
2. Date of Priority: JUL 11, 1974
3. Source: GROUNDWATER Trib. to:
4. Point of Diversion:

Township	Range	Section	1/4	of	1/4	of	1/4	Lot	County
02N	18E	9	NE		NW		SW		BLAINE
5. Description of diverting works:
WELL, PUMP & PIPELINE
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:
DOMESTIC/1 HOME

A37-13397

Page 1

Date: 10/04/90

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10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
02N	18E	9	NW SW		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:

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

Identification No. A37-13397Date Received 9/21/90Receipt Number 5012725RECEIVED
OCT 1 1990Department 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.

RECEIVED
SEP 21 1990Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) SHIRLEY PALUZZI OR
LINDA RAE SCROGGINS OR
TIMOTHY ROBERTS Phone (714) 822 3576Mailing Address 18138 MERRILL, FONTANA, CA. Zip 923352. Date of Priority (Only one per claim) 7-11-74 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township T 2 N Range 18 E.Section 9, NE 1/4 of NW 1/4 of SW 1/4, Govt. Lot _____, BM.,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 40' DEEP 1/2 HP SUBMERSIBLE
PUMP, PIPE TO MOBIL HOME.

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

For DOMESTIC purposes from 1-1 Month/Day to 12-31- Month/Day amount 0.04 (cfs)

(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) DOMESTIC 1 HOME

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10. Place of use is: Township: T2N Range 18E

Section 9, NW 1/4 of SW 1/4, Govt. Lot _____, B.M.,

County of BLAINE for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

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.

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood 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)

Timothy Roberts

Date

9-15-90

Shirley M. Fubizzi

Date

9-15-90

David Lee Swaggin

Date

9-15-90

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 _____

Title

Organization

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

Signature of Authorized Agent _____ Date _____

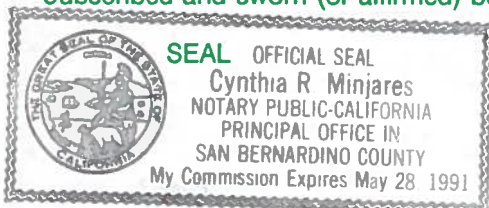
Title and Organization _____

State of Idaho/or California)

SS.

County of San Bernardino)

Subscribed and sworn (or affirmed) before me this 15 day of September 19 90



Notary Public

Residing at 101 E. Foothill, Rialto, CA 92376

My Commission Expires 5-28-91

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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Shirley Palermo
18135 Meynell
Fontana, Calif
92335



Idaho Dept. of Water Resources
222 Shoshone Street East
Twin Falls, Idaho
83301

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MAR 01 1993

Att: Judy Givens



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

September 24, 1990

Shirley Paluzzi and/or Linda Rae Scroggins
and/or Timothy Roberts
18138 Merrill
Fontana, CA 92335

Re: Adjudication Claim No. A37-13397

Dear Applicant(s):

We received your adjudication claim and assigned it the above-referenced number. After reviewing it, I find you did not fill out the priority date, which is question No. 2, requires the month, date and year that your well was drilled or put to beneficial use.

Please fill out and return to this office. Should you have any questions, please contact us.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Judy Givens'.

Judy Givens
Secretary

/jg

Enclosure:

*Returning application. Question No. 2
answered. Sorry*

*Sincerely,
Shirley Paluzzi*

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MAR 01 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. E., Twin Falls, Idaho 83301

(208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Oct. 5, 1990

Re: A37-13397

SHIRLEY PALUZZI
18138 MERRILL
FONTANA CA 92335

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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MAR 01 1993

WATER RIGHT NUMBER - A37-13397

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - OLD WATER RIGHT NUMBERS - - - - - +
+ - - - - OLD WATER RIGHT NUMBERS - - - - - +
NO OLD WATER RIGHT NUMBERS FOUND.
+ - - - - CONDITIONS OF APPROVAL - - - - - +
NO CONDITIONS OF APPROVAL FOUND.
+ - - - - DECREE PLAINTIFF - - - + + - - - - DECREE DEFENDANT - - - + + - DECREE DATE - +
00/00/0000
+ - - AUDIT FIELDS - 10/05/90 GIVENS
+ - - - - 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	- 10/04/1990	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	- S012725	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	-

02 N/8 0092820 A

DATA ENTRY
ENTERED 12-31-93 JS
CHECKED 2/4/94 DW

"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 16 1992

PROOF
JAN 07 1992

CERTIFIED
FEB 27 1992
WATER EXAMINER