

01/23/2004

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 23-10256

NAME AND ADDRESS: DUANE N DENNING
4084 E 129 N
PO BOX 460
UCON ID 83454

VIOLA M DENNING
PO BOX 460
UCON ID 83454

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS

The quantity of water under this right shall not exceed 2,500 gallons per day.

PRIORITY DATE: 05/06/1942

POINT OF DIVERSION:

T01N R44E S35 NESENW Within BONNEVILLE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

COMMERCIAL

1/01 12/31

0.040 CFS

PLACE OF USE:

COMMERCIAL Within BONNEVILLE County

T01N R44E S35

SENW

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

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

The quantity of water decreed for this water right is not a determination of historical beneficial use.

EXPLANATORY MATERIAL: Beneficial Use

SCANNED
JUL 21 2004

Contacts Data Entry Form

Owner Type	Full Name	Address	City	State	Zip	Phone
Current Owner	DUANE DENNING					

Name connector: and ____, or ____, and/or ____

Current Owner _____

Current Owner _____

Representing Attorney: _____ Phone Number: _____

Accompanied By: _____ Phone Number: _____

Relationship to Claimant: _____

Date of Field Exam: _____ Time: _____

Directions to Property (if different from above) and/or update owner information:

BENEFICIAL USE CLAIM

FO: NLO 11/1/03

FO: POO/Dev, USG, System

Reviewer: _____

Date: _____

Priority Date Data Entry Form

Claim Number: _____

Water Right Priority Date: _____ Water Right Basis: _____

Claimed Priority Date: May 6, 1942 Claimed Basis: BENEFICIAL USERecommended Priority Date: 8/5/1952 Recommended Basis: _____☐ Use Claimed Priority Date and Basis as Recommended Priority Date and Basis

Document the evidence submitted/reviewed for the priority date claimed, include your analysis of the evidence:

EVIDENCE Supports BACK to 8/5/1952, BY
Notarized Statement of HARVEY VOLLMAN.

Reviewer: _____

Date: _____

Water Right No(s).

A2310256



GPS DATA:

Tag #

AO 009518

Location:

Well casing

Diversion Data:

Source:

Well

Trib to:

Ground Water

MOTOR

Make:

Submergible

Model:

NA

Hp:

3/4

SN:

NA

PUMP

Make:

Submergible

Model:

NA

Disch:

NA

SN:

NA

NOTES:

RPDIN44E351515

Field Exam Date:

11-1-03

Agent:

NICK OLSON

Point of Diversion and Source Data Entry Form

Claim Number: _____

Water Right Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary: _____

Claimed Point of Diversion: T IN, R 44E, Sec. 35, SW, SW, NE, County: BonnSource: GW Tributary: _____

Recommended Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary: _____

____ Use Claimed POD and Source as Recommended POD and Source

Twsp	Rge	Sec	Gov Lot	QQQ of QQ of Q	County	Source
<u>IN</u>	<u>44E</u>	<u>35</u>			<u>Bonn</u>	<u>GW</u>

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

GPS Coordinates: _____

Other rights from this POD? GPS TAG # A0 009518 well casing

Document how the POD and Source were verified and/or Pump and Motor data:

Well to Service Station

Transfers Changing POD _____

Reviewer: _____

Date: _____

N 46
N 11

Place Of Use Data Entry Form

Claim Number: _____

_____ Use Claimed POU as Recommended POU

Claimed Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
1N	44B	35	SW	NB	Benn	4		Common

Total Acres _____

Recommended Place of Use

Twp	Rge	Sec	QQ	Q	County	Lot Num	Acres	Purpose of Use
1N	44B	35	SW	NB	Benn			Common

Total Acres _____

Document how the POU was verified:

POU appears claimed as wrong POU - BU (NO) C3

Transfers Changing POU _____

Reviewer: _____

Date: _____

Period of Use and Quantity Data Entry Form

Claim Number: _____

☐ Use Claimed Period of Use and Quantity as Recommended Period of Use and Quantity

Water Right Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Claimed Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
<i>Common</i>	_____	_____	<i>0.04</i>	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
<i>Common</i>	_____	_____	<i>0.04</i>	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Document how the Period of Use and/or Diversion Rate were verified:

1/501 One Service Station

N#6
N11

Reviewer: _____

Date: _____

MAILED
7/8/03
July 7, 2003

Duane Denning
PO Box 460
Ucon ID 83454

RE: EVIDENCE OF PRIORITY FOR WATER RIGHT CLAIMS 23-10255 and 23-10256

Dear Claimant (s):

The Idaho Department of Water Resources is nearing the end of water rights review in Basin 23. The Notice(s) of Claim identified with the number shown above has been filed in the Snake River Basin Adjudication (SRBA). The Notice of Claim indicates water usage is based on "Beneficial Use". Water rights of this type are established by the historical use of water, dating back to when water was first used for the purpose claimed, at or on the place of use identified on the Claim. The date the water was first put to beneficial use, known as the priority date, has not been confirmed by License, Decree, or Permit. For this reason, proof must be provided supporting the priority date. **As the claimant, you are responsible for submitting the necessary proof to support the priority date.**

Your claims; 23-10255 referenced above, shows a Priority Date of June 27, 1953, from a well, and, 23-10256 also referenced above, show a priority date of May 6, 1942 from a well.

It is important that each element of the Notice of Claim be verified. For instance, regarding claims for irrigation, the evidence should tend to show that diversion works were in place, that they were capable of diverting the claimed diversion rate, and that the diverted water was beneficially used on the entire claimed place of use on or before the claimed priority date.

For your reference, I have provided a printout of your Notice of Claim and the pamphlet entitled **"Evidence of Priority"**. The pamphlet describes the types of evidence required and suggests which documents will fulfill this requirement. While I encourage you to read the entire pamphlet, I direct your attention to the two sections entitled **"What Kind of Evidence is Required"** and **"Some Examples of Documents Which May Be Evidence of the Priority Date"**.

It is our goal to recommend historical water rights within the Snake River Basin as accurately as possible. Field exams to verify other elements of the Notice of Claim have been or soon will be conducted by Department personnel.

.....
The Department will not recommend the Notice of Claim be decreed by the court if
evidence of a priority date is not submitted. The Notice of Claim will be disallowed.
.....

Please submit the documentation supporting the priority date within 30 days of the date of this letter, referencing all documents with the corresponding Claim number. If you have any questions not covered by this letter or the enclosed pamphlet, please feel free to contact this office.

Respectfully submitted,

Allen B. Ruberry
Sr. Water Resource Agent
Adjudication Bureau

cc: File

Enclosure: Brochure on "Evidence of Priority"
Notice of Claims (copies) 23-10255 and 23-10256

Jan 9, 2004

My parents owned this property in
8-51952 with our home, cabins, hook-ups
for trailers and with washroom and
heat rooms. Also the Service Station
and Smoke Bar that had rest room

July 7, 2004
01-09-04



Notary Public - Notary
Comm. Exp. 9-17-2004
This 9th day of January, 2004

Used as Evidence of Priority

RECEIPT

Date Sept 5 1970 No. 8765

Received From Ford Perich

Address 5026 Ida

Dollars \$ 2.20

For Overnight Parking

HOW PAID

CASH 2.20

CHECK

MONEY ORDER

ACCOUNT

AMT. OF ACCOUNT

AMT. PAID

BALANCE DUE

By S.R. Vallman

BK500 Reclips

ROYAL CROWN COLA BOTTLING CO.

DIAL 522-9032

IDAHO FALLS, IDAHO 83401

P.O. BOX 46

SOLD TO

299028

1

DUTCH'S RICHFIELD SERVICE

PALISADES, IDAHO

83437

DATE

6/10/70

DESCRIPTION	Price & Deposit	QUAN.	AMOUNT
ROYAL CROWN COLA	10 oz. <u>275</u>	<u>1</u>	<u>275</u>
" " "	16 oz.		
DIET-RITE COLA	12 oz.		
D. R. LEMON LIME	10 oz.		
FROSTIE	10 oz. <u>275</u>	<u>1</u>	<u>275</u>
"	16 oz.		
NEHI	10 oz.		
"	12 oz. <u>315</u>	<u>1</u>	<u>315</u>
BUBBLE UP	10 oz.		
" "	16 oz.		
" "	12 oz.		
LO-CAL SQUIRT	10 oz.		
WHITE ROCK SPARKLING WATER	28 oz.		
" " GINGERALE	28 oz.		
BUBBLE UP	28 oz.		
SQUIRT	28 oz.		
QUININE	10 oz. NR.		
CANS	12 oz.		
VENDOR COLLECTIONS			

TOTAL CHARGES

865

DEPOSIT	QUAN.	AMOUNT
<u>100</u>	<u>3</u>	<u>300</u>
CASES		
CASES		
EMPTY SHELLS		
BOTTLES		

TOTAL RETURNED DEPOSITS

300

NET AMOUNT DUE

565

H 23826

ACCOUNTS DUE AND PAYABLE 10TH OF THE MONTH. 1 1/2% SERVICE CHARGE PER MONTH WHICH IS AN ANNUAL INTEREST OF 18% APPLIED ON PAST DUE ACCOUNTS.

DRIVER

REC'D BY

© 240765

ROYAL CROWN COLA BOTTLING CO.
 IDAHO FALLS, IDAHO 83401
 DIAL 522-9082
 P. O. BOX 46

SOLD TO
 299028
 DUTCH'S RICHFIELD SERVICE

PALISADES, IDAHO 83437

DATE

9/26/59

DESCRIPTION QUAN AMOUNT

ROYAL CROWN COLA 40 oz. 225 225

" " 16 oz. 16 16

DIET-RITE COLA 12 oz. 12 12

D. R. LEMON LIME 10 oz. 10 10

FROSTIE 10 oz. 10 10

" " 16 oz. 16 16

NEHI 10 oz. 10 10

" " 12 oz. 12 12

BUBBLE UP 10 oz. 10 10

" " 16 oz. 16 16

SQUIRT 7 oz. 7 7

" " 12 oz. 12 12

LO-CAL SQUIRT 10 oz. 10 10

WHITE ROCK SPARKLING WATER 28 oz. 28 28

GINGERALE 28 oz. 28 28

BUBBLE UP 28 oz. 28 28

SQUIRT 28 oz. 28 28

QUININE 10 oz. NR

CANS 12 oz.

VENDOR COLLECTIONS

TOTAL CHARGES 275

CASES 100

Empty Shells

ROTTES

TOTAL RETURNED DEPOSITS 100

NET AMOUNT DUE 175

PROPER CARE MUST BE TAKEN OF ALL CASES
 THEY ARE NOT SOLD BUT REMAIN THE PROPERTY OF

6 35153

ROYAL CROWN COLA BOTTLING CO. of IDAHO FALLS

REC'D BY DRIVER

RECEIPT

Date

Oct 13 1969

No. 8742

Received From

Lowell Smith

Address

Lowell Smith

For

Dollars \$ 200

ACCOUNT	HOW PAID	
	CASH	CHECK
AMT. OF ACCOUNT		
AMT. PAID		
BALANCE DUE		

By

Lowell Smith

BK800 11/1/69

GAS — Fuel Oil Delivery — OIL

Phone 3403

DUTCH'S SERVICE
D & D SERVICE
Yellowstone Ave. & Oak
POCATELLO, IDAHO

Customer's Order No. _____ Date Jan 28 1957

M. Roy Stankewitz

Address						
SOLD BY	CASH	C. O. D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT
			✓			
QUAN.	DESCRIPTION				PRICE	AMOUNT
44 ³	NO1 Stone Oil					8 13
5	Reg					1 60
2	Cats Brake fluid					1 60
7	Reg					2 25
98	Reg					3 15
Total						16 73
Ray Stankewitz						

Receipt MUST be accompanied by this bill

ALL claims and returned goods MUST be accompanied by this bill

7045

Rec'd by

MOORE BUSINESS FORMS, INC.

GAS —

DUTCH'S SERVICE
Yellowstone Ave. & Oak
POCATELLO, IDAHO

Customer's Order No. _____ Date 10-11 1956

M. Stankewitz

Address						
SOLD BY	CASH	C. O. D.	CHARGE	ON ACCT	MDSE. RETD.	PAID OUT
20			1			
QUAN.	DESCRIPTION				PRICE	AMOUNT
44 ²	No 1. Fuel oil				184	8 13
	Oct 13-56					1 60
3	Reg					
	Nov 10-56					
2	Brake fluid					1 60
						11 33

ALL claims and returned goods MUST be accompanied by this bill

6940

Rec'd by

MOORE BUSINESS FORMS, INC.

STATEMENT

GAS — FUEL OIL DELIVERY —

DUTCH'S SERVICE
Yellowstone Ave.
POCATELLO, IDAHO

Phone 3403

Roy Stankewitz

Oct 13-1956

5 gal Oil

Custom Stankewitz

Nov 11-56

133 Reg

Reg

Nov 17-56

98 Reg

2 Brake fluid

44³ Stone Oil

Total

July 8
July 7
6
5
4
July

5373
30.9
5896.7
5
7.9
7.8
25
14
20

6.00 cash

1268.07
1149
76.6
3447

38.3
19-17 102 6.13
21.6
1.97
14.53

July 29 - 152

Green Park

2nd Road Feb 14 1956
From Sargent

Mar	59.5	=	10.71	paid
Porter	46.5	=	8.37	paid
J. L. L.	45.5	=	8.19	paid
Lee Allen	29	=	5.07	paid
Smart	47.5	=	8.55	paid
Bill Allen	69.5	=	12.16	paid
<u>297.5 gal</u>		<u>\$53.05</u>		

FANNING WHOLESALE COMPANY, Inc.

Market and Yellowstone Ave.

P. O. Box 248

CANDY - CIGARS - CIGARETTES — FISHING AND HUNTING SUPPLIES
BAR AND FOUNTAIN SUPPLIES - GLASSWARE

Idaho Falls, Idaho.

Sold to.

Address:

CASH SALE

CHARGE SALE

REC. ON ACCT.

CREDIT MEMO

[illegible]

INVOICE

MOORE BUSINESS FORMS, INC., PACIFIC DIV.

$$\begin{array}{r} 16.5 \\ 3 \\ \hline 49.50 \end{array}$$
 Storeail *engd*
 26.90 *Ruggasengd*

$$\hline 76.40$$
 Rugato
 H. O. Sargent
 Feb 6, 1956
 by
 Dutch
 1st Lord

RECEIPT

Date

19

No. 870

Received From

Address

For

Dollars \$

ACCOUNT		HOW PAID			
AMT. OF ACCOUNT		CASH	CHECK	MONEY ORDER	
AMT. PAID					
BALANCE DUE					

8K800 Receipt

44 1.50

By James R. King 042910

RECEIPT

RECEIPT

Date Oct 20 19 65 No. 8706

Received From George Cook

Address 1613 N. Harrison Ponatillo, Ill.

Seven + 50 Dollars \$ 7.50

For Cabin # 5 3 nights

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	☒
AMT. PAID	<u>7.50</u>	CHECK	
BALANCE DUE		MONEY ORDER	

By Sylvia R. Uellman

8K800 Radiform

to 1022

RECEIPT

Date Oct 20 1965 No. 8708

Received From Ray Axtman

Address Den + Para

Dollars \$ 100

For Cabin # 5 from Oct 20 to Oct 27

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	☒
AMT. PAID		CHECK	
BALANCE DUE		MONEY ORDER	

By Lyle R. Ullman

8K800 Rediform

tot #30

RECEIPT

Received From _____

Address _____

For _____

Dollars \$ _____

By _____

8K800 Rediform

RECEIPT Date Oct 20 1965 No. **8707**

Received From Sam Doney

Address _____

Sam + Yu Dollars \$ 10.00

For Cabin #2

from Oct 20 to Oct 27th

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	
AMT. PAID		CHECK	
BALANCE DUE		MONEY ORDER	

By Lyman R. Vollmer

8K800 Rediform

tax 30

TRAILER COURT PERMIT

BONNEVILLE COUNTY — STATE OF IDAHO

Nº 318

Business Name Highland Trailer Court

Address Irwin, Idaho

Operator E.H. Vollman

Quarter from July 1st. 1955 to Sept. 30th, 1955

Fee \$ 7.50 Dated August 10th. 1955, 19

Attest:

Larry L. Hansen M.D.
by V. Gilbert R.M.
County Health Officer

Bonneville County Board of Health

By C. N. Swensby
Chairman

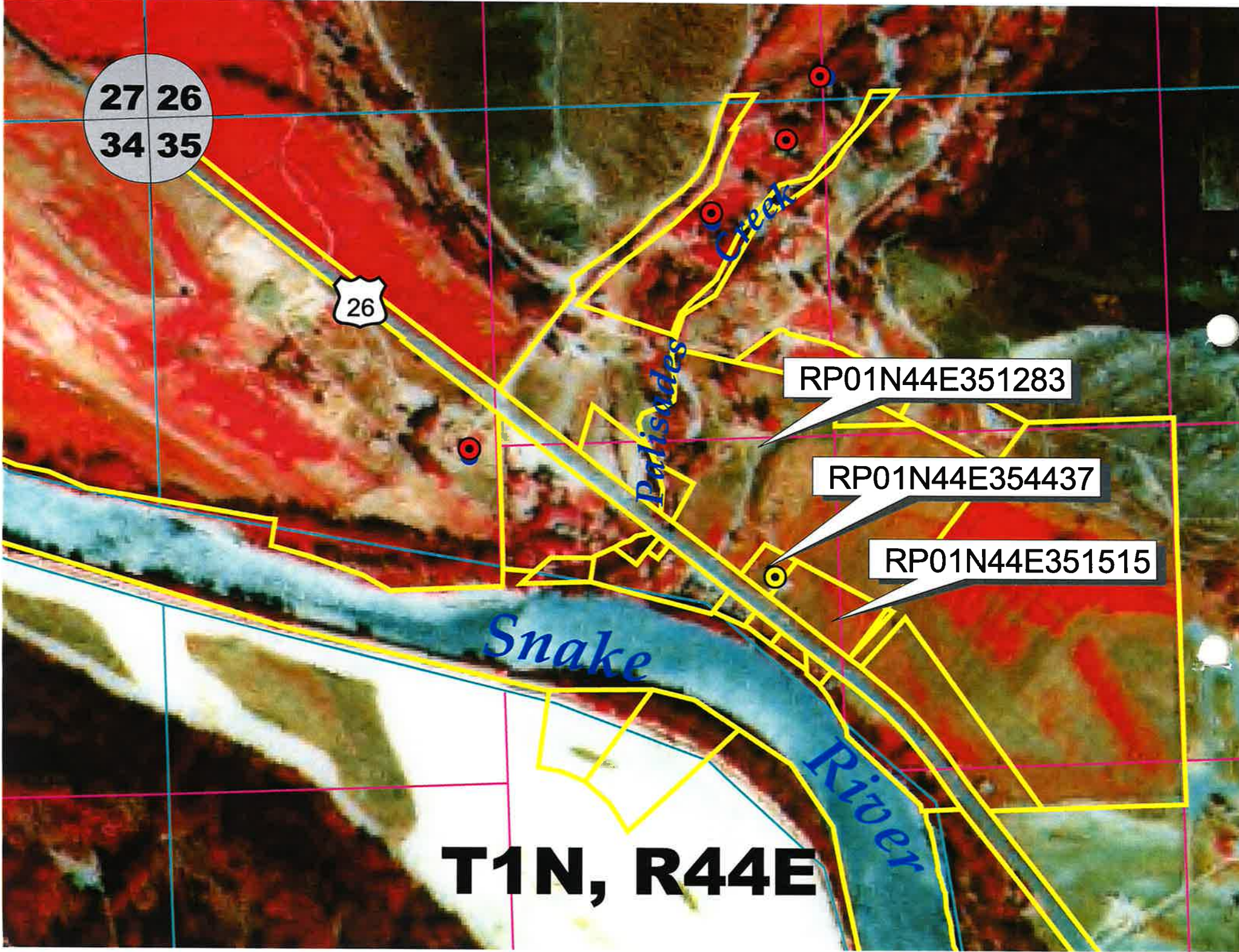
INVENTORY

September 12, 1955

PAGE 1

SHEET NO. _____ PRICED BY _____
 CALLED BY _____ DEPARTMENT _____ EXTENDED BY _____
 ENTERED BY _____ LOCATION _____ EXAMINED BY _____

CHECK	QUANTITY	DESCRIPTION	✓	PRICE	UNIT	EXTENSIONS
	12	Filters AC P209		1.22		14.64
	2	PF210		1.55		3.10
	2	Fram C-3		1.01		2.02
	2	AC P-203x		1.01		2.02
	2	P-111		1.12		2.24
	1	P-112		1.33		1.33
	2	PF-319		1.79		3.58
	4	Fram C-31		1.90		7.60
	1	C-30		1.72		1.72
	1	Deluxe CU-CS		1.22		1.22
		Fram WD 10-1 Water Cleaners		2.57		15.42
	15	Bug Screens		.75		11.25
	1	Freeman Headbolt Heater 7547CS		7.15		7.15
	1	" " " 7547C		7.15		7.15
	20	Gas Caps		.40		8.00
	35	Radiator Caps		.25		8.75
	3	Dual Loc Gas Caps		1.60		4.80
	7	Permatex Cleaner		.90		6.30
	10	Spark Plugs AC 46-5		.45		4.50
	8	46		.45		3.60
	6	44 Com.		.45		2.70
	10	45 Com.		.45		4.50
	3	45		.45		1.35
	9	Champ. H-10		.45		4.05
	3	Y-4A		.45		1.35
	13	2 Com.L		.45		5.85



27 26
34 35

26

Palisades
Creek

RP01N44E351283

RP01N44E354437

RP01N44E351515

SNAKE

Snake
River

T1N, R44E

FROM Carter Fritschle

TO Adj. Claim A23-10256

DATE 9-29-89

SUBJECT P/D & P/u. of this claim may be in error. The service station did not appear on the orthophotoquad where the claimant stated it should be.

MICROFILMED

NOV 8 6 1989

Carter Fritschle
SIGNATURE

DATA ENTRY BY CD

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: A23-10256
Date Received: 9/29/1989
Receipt No: E010898
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DUANE N. DENNING 208-523-4600
Address: P.O. BOX 460
UCON, ID 83454

AND/OR

Name: VIOLA M. DENNING 208-523-4770
Address: P.O. BOX 460
UCON, ID 83454

A2310256

2. Date of Priority: MAY 06, 1942

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
01N	44E	35	SW	SW	NE		BONNEVILLE

5. Description of diverting works:
WELL, 6" CASING, SUB. PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
COMMERCIAL	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:
C/1 SERVICE STATION AND SNACK BAR

A23-10256

Page 1

Date: 09/29/89

MICROFILMED
NOV 06 1992

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
01N	44E	35	SW NE	4	COMMER	

11. Place of use in counties: BONNEVILLE

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 A23-10256
Date Received 9-29-89 CA
Receipt Number E010898

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Duane N. and/or Viola M. Denning Phone (208) 523-4770
Mailing Address P.O. Box 460 Ucon, ID Zip 83454

2. Date of Priority (Only one (1) per claim) May 6, 1942

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

4. a. Location of existing point of diversion is: Township 1N Range 44E Section 35,
SW 1/4 of SW 1/4 of NE 1/4, Govt. Lot, 4 B.M., County of Bonneville

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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,

submersible pump.

MICROFILMED

NOV 06 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Commercial purposes from 1-1 to 12-31 amount .04 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.04 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Commercial, 1 service station & snack bar

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			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	
1N	44E	35			Lot 4 C														

Total number of acres irrigated _____

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

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)

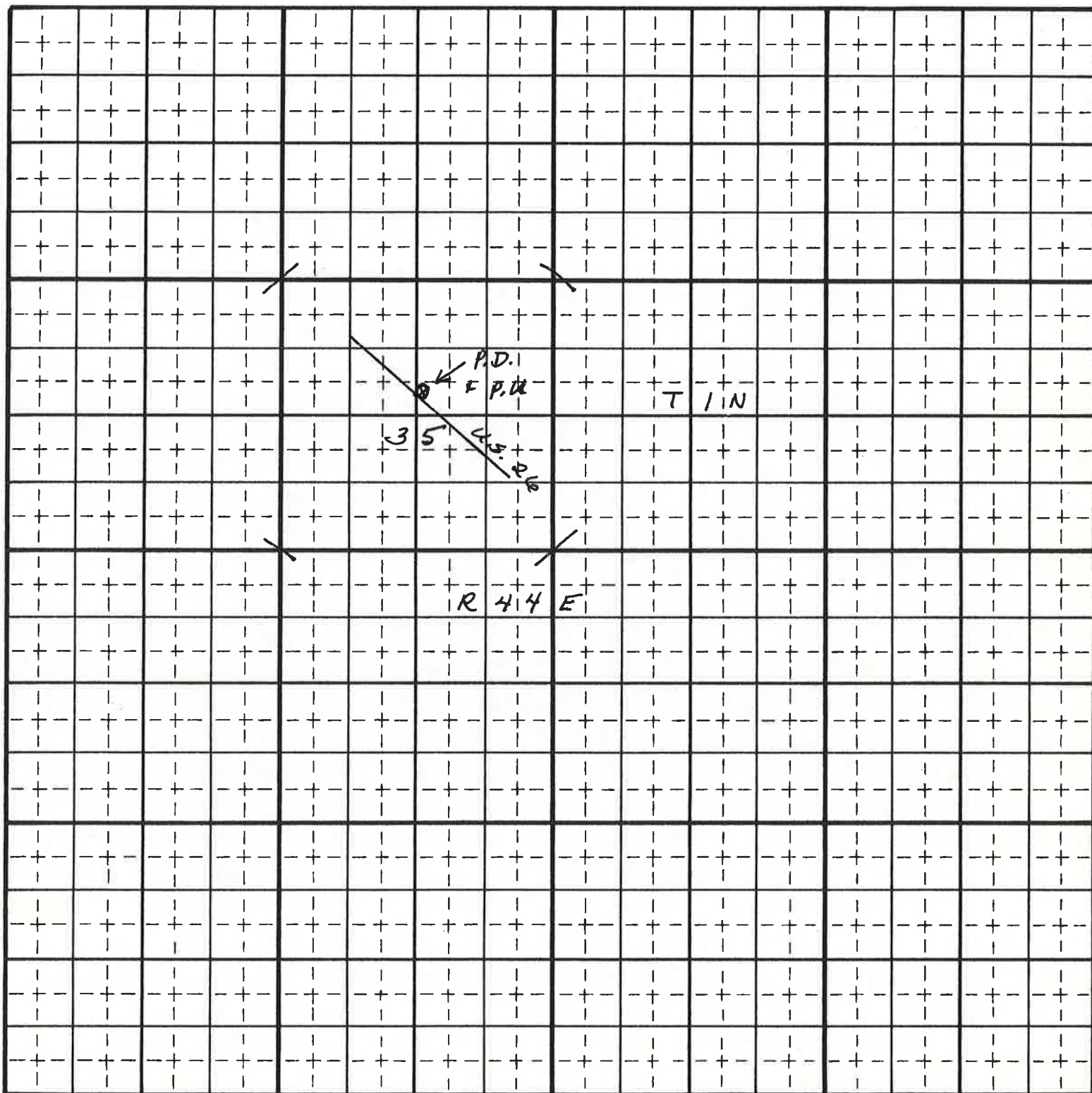
14. Remarks:

Last Name Dennig Ident No. A23-10256

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Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



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Last Name Denning

Ident No. A23-10256

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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) *Diana Denning*

Date 9-29-89

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 Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 29th day of September 19 89

SEAL

Notary Public *Carter Fritschle*

Residing at _____ Carter Fritschle, Notary Public

Residing at Eagle, Idaho

My Commission Expires _____ My commission Expires March 21, 1994

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, _____ will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name Denning Ident. Number 123-10256

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