

06/11/2004

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

RIGHT NUMBER: 25-14056
NAME AND ADDRESS: YUONNE HAMMOND
772 KINSWOOD
IDAHO FALLS ID 83404

BOYD HAMMOND
772 KINSWOOD
IDAHO FALLS ID 83404

SOURCE: GROUND WATER
QUANTITY: 0.040 CFS

TRIBUTARY:

The quantity of water under this right shall not exceed 13,000 gallons per day.

PRIORITY DATE: 01/01/1981

POINT OF DIVERSION:

T02N R38E S32 SWNW Within BONNEVILLE County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
DOMESTIC	01/01 12/31	0.040 CFS
Domestic use is for 1 home.		

PLACE OF USE: DOMESTIC Within BONNEVILLE County
T02N R38E S32 SWNW

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

Water Right 25-14056

PROFILED

1

SCANNED

OCT 15 2004

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 25-14056
Date Received: 4/20/2004
Receipt No:
Received By:

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

YUONNE HAMMOND Phone: (208)524-3732
772 KINSWOOD
IDAHO FALLS ID USA 83404

BOYD HAMMOND Phone: (208)529-0798
772 KINSWOOD
IDAHO FALLS ID USA 83404

2. Date of Priority: 01/01/1981

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
02N	38E	32	SW NW	BONNEVILLE	

5. Description of diverting works:

HOME WELL- 1/2 ACRE LAWN

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
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02N

38E 32

SW NW

DOMESTIC

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:

14. Remarks:

15. Basis of Claim: Beneficial Use

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. 25-14056Date Received 4/19/2004Receipt Number E029736

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

Please type or print clearly

① Name of Claimant (s) Boyd Hammond or Yvonne Hammond Phone (208) 524-3732
Mailing Address 772 Kinswood St, Idaho Falls, Id Zip 83404

② Date of Priority (Only one per claim) 1/1/81 Month/Day/Year

3. Source of water supply (Check one) (☒) Groundwater or Other () (a) _____
which is tributary to (b) _____ Name or kind of source

④ Location of point of diversion is: Township 2N Range 38E
Section 32, _____ 1/4 of SW 1/4 of NW 1/4, Govt. Lot _____, BM.,
County of Bonneville Co

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. Home well - 1/2 Acre lawn.

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

For Domestic purposes from 1/1 to 12/31 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 minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) Domestic - 1/2 lawn/garden

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OCT 15 2004
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10. Place of use is: Township: 2N Range 38E
Section 32, SW 1/4 of NW 1/4, Govt. Lot _____, B.M.,
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? 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.

(X) None or _____

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) Juonne Hammond Date 4/19/04
_____ Date _____

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

of _____, Title _____, 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 _____ Date _____

Title and Organization _____

State of Idaho/or _____)

County of Bonneville) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 19th day of April, 2004

SEAL

Notary Public Wendy J. Murphy

Residing at Idaho Falls

My Commission Expires 6/23/06

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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OCT 15 2004

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06/11/2004

**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 25-14056

YUONNE HAMMOND

772 KINSWOOD

IDAHO FALLS ID 83404

Telephone Number: (208)524-3732

BOYD HAMMOND

772 KINSWOOD

IDAHO FALLS ID 83404

Telephone Number: (208)529-0798

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):
2. Describe the changes you wish to make in the proposed recommendation:
3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE:

9/15/04

SIGNATURE:

Boyd L. Hammond MD.

Please print your name:

Boyd L. Hammond MD.

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161

FILED

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SEP 15 2004