

09/10/2003

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

RIGHT NUMBER: 27-7376
NAME AND ADDRESS: ROSS B CHANDLER
422 E 500 N /
FIRTH ID 83236

LA FAY CHANDLER
422 E 500 N
FIRTH ID 83236

SOURCE: GROUND WATER TRIBUTARY:

QUANTITY: 0.060 CFS
6.10 AFY

THIS RIGHT IS LIMITED TO A TOTAL COMBINED DIVERSION RATE OF 0.06 CFS AND TO A TOTAL COMBINED ANNUAL DIVERSION VOLUME OF 6.1 AF.

PRIORITY DATE: 06/27/1983

POINT OF DIVERSION:
T02S R36E S16 SWNW Within BINGHAM County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
STOCKWATER	01/01 12/31	0.020 CFS 0.20 AFY
IRRIGATION	04/01 11/01	0.020 CFS 3.50 AFY
DOMESTIC 2 units	01/01 12/31	0.060 CFS 2.40 AFY

PLACE OF USE: IRRIGATION Within BINGHAM County
T02S R36E S16 SWNW 1.0
STOCKWATER Within BINGHAM County
T02S R36E S16 SWNW
DOMESTIC Within BINGHAM County
T02S R36E S16 SWNW

1 ACRES TOTAL

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

THIS RIGHT IS SUBJECT TO REGULATION BY THE WATERMASTER OF
WATER DISTRICT 01.

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.

EXPLANATORY MATERIAL: BASIS OF CLAIM - License



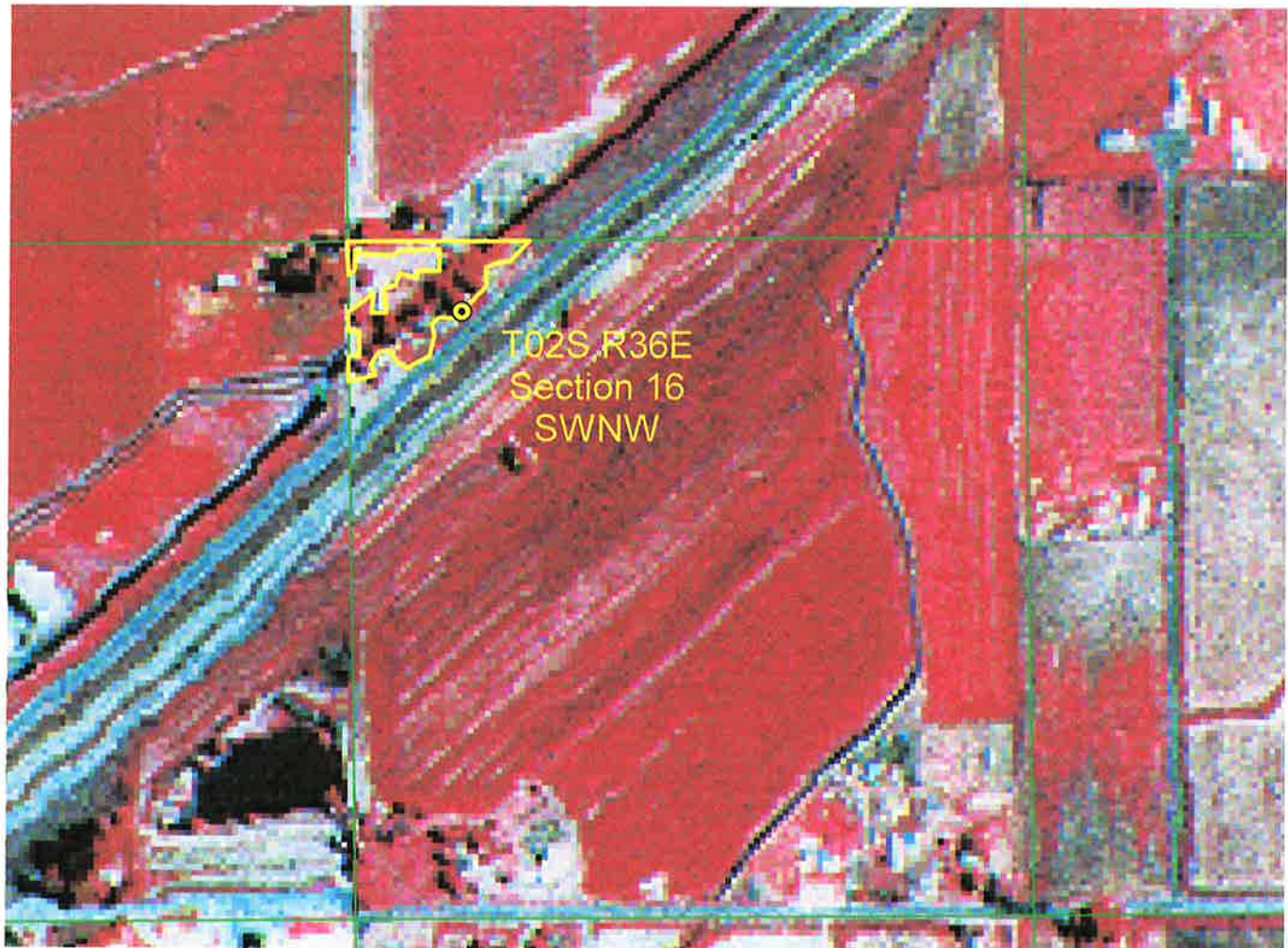
STATE OF IDAHO

Department of Water Resources

Eastern Region



Water Right(s) 27-7376



200 0 200 400 Feet

SCANNED
MAY 17 2006

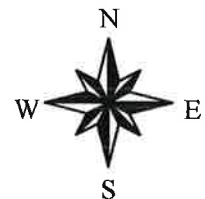
IRRIGATED ACRES 1.0

LEGEND

- ⊙ Point of Diversion
- Place of Use
- Townships
- Sections
- Quarter-Quarters

Place of Use: T2S, R36E:
(part of) Sec. 16, SWNW

Point(s) of Diversion: T2S, R36E:
Sec. 16, SWNW



GIS Place of Use Illustration
1987/88 NAPP Photography
Prepared by: B. Payne
Date: May 2004

06/08/2004

**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: 27-7376

ROSS B CHANDLER
422 E 500 N
FIRTH ID 83236
Telephone Number:

Decided Oct. 13-2000
208-785-3760 208-182-2044

*change to
previous owner
Per Court. Completed
6/9/05 KMS*

LA FAY CHANDLER
422 E 500 N
FIRTH ID 83236
Telephone Number:

(208) 785-3760 782-182-2044

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: 6-2-05

SIGNATURE: Lafay Chandler

Please print your name: Lafay Chandler

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

SCANNED
MAY 17 2006

PROFILED

*KMS
6/9*

27-7376
27-7377

December 12, 2005

LA FAY CHANDLER
373 N 200 E
BLACKFOOT ID 83221

Dear Claimant:

It has come to our attention that your address may have recently changed. The address currently recorded on the above referenced water right(s) is as follows:

LA FAY CHANDLER
422 E 500 N
FIRTH ID 83236

We recommend if, in fact, the address in question has been changed, you file a "Change in Address" with this department in order that we may send all further correspondence to the appropriate address.

Enclosed is a Change in Address form. Please fill out the form completely, sign and date it and return it to my attention.

If you have any questions regarding this matter, please call 525-7161.

Respectfully submitted,

Katy Jackson
Office Specialist 1

Enclosure(s)

SCANNED
DEC 15 2005

RECEIVED

INTER-DEPARTMENT MEMO

TO: Pauline

SUBJECT: address Correction

FROM: Cindy

DATE: 5/18/84

Please correct the address in the CVR
and reprint preliminary recommendation

New address: LaFay Chandler

373 N. 200E.

Blackfoot 83221

1-208-782-2044

* Barbara - reprint layout zoomed out so you
can get a better idea of the area DBD

() For your information

☒ Response required

CR
signature

Notes

5/18/04 1:30 pm Apt with LaTay Chandler & Marla Woodhouse on claims 27-7377 & 27-7376.

The legal description under 27-7376 is correct and is known as the Walpole property.

This property is owned by LaTay Chandler. Ross passed away October 13, 2000.

27-7377 is incorrect. The warranty deed from Marla Woodhouse is in the SWSW of Sec 2, NOT the NWSW as licensed.

From earlier conversations with Marla there was an error under this right because her sister (Shawna Womack) purchased the other 11 acres under this property and she irrigates it with the well. Total of 12 acres.

Mrs. Chandler's warranty deed dated 1968 conveyed Snake River irrigation water.

Mrs. Chandler was under the impression that there was an error on the original paperwork and they had the entire place irrigated.

after checking the license I could see that Marla's warranty deed and the legal under the license are incorrect. The examiner's report showed the Pool in

5-18-01 cont'd.

Notes

SWSW but it wasn't picked up as being incorrect.

I couldn't find a new application or any other water rights for DeRay Wornack so I called Ruth Wilson at the region.

When the Chandlers submitted proof they claimed irrigation of 10.2 acres but the permit was only for 1 acre.

Ross Chandler accompanied the examiner and said each home (2) irrigates $\frac{1}{2}$ acre and that the pasture was irrigated by Snake River water.

In Oct. 2001, the well driller filed a drilling report for DeRay Wornack for a domestic well only.

I explained to LaFay & Marla that DeRay CAN'T IRRIGATE ANYMORE than $\frac{1}{2}$ acre with his well. If he does then he is in violation and can be fined.

Then Marla said, "that is all they are doing"

I told Marla that her sister needs to file an ownership change to split the dome off this right. Because Marla got one home, DeRay, & Shawna got the other home.

I'm going to have Skip verify this info. ¹ CB

Notes

8/6/03. Adjust the claimed POU to 1 acre of land. Otherwise, the claim matches the 1986 license.

link POD, POU

File names: POD _____
POU _____

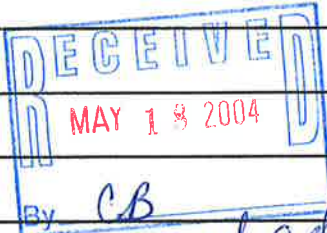
4-27-04 Sent Mrs. Chandler a change in address form. Also requested a copy of the warranty deed since there is not one on file and a copy of her husband's death certificate. PB

5/12/04 La Fay Chandler came in and brought the address update along with a copy of her husband's death certificate. CB

Claim Summary worksheet

Claim No. 27 - 7376

Completion of claim is dependent
on processing the following
documents and/or actions.

	Requested	Response date	Received	Completed	Notes
OWNERSHIP					
Ownership Change Form					Requested address change form, warranty deed and husband's death certificate Response date 5-18-04
Warranty Deed					
Map(s)					
Is this a split? Y <u>N</u>					
AMENDMENT					
Notarized amended claim					 Received address update.
Correction in POD/Source					
Correction in POU					
Change in Priority Date					
Change in Diversion Rate					
ENLARGEMENT					
1. Advised claimant need to file enlargement claim					
2. Receive enlargement claim					
3. Eastern registration process					
4. Notarized claim					Enlargement Claim # -
SPLIT CLAIM	Obtain information from Eastern				Parent Right # - : CFS
Ownership					Children # - ; CFS
					Children # - ; CFS
					Children # - ; CFS
					Children Total: CFS

Children total must agree with parent right.

**SNAKE RIVER BASIN ADJUSTICATION
CHANGE IN ADDRESS OF NOTICE OF CLAIM**

Claim Number(s):

27-7376

Previous Mailing Address:

Ross and LaFay Chandler
422 East 500 North
Firth, Idaho 83236

New Mailing Address:

LaFay Chandler
343 N. 200E
Blackfoot, Id. 83221

Telephone Number:

(208) 782-2044

Signature of Claimant(s):

LaFay Chandler

Please return this completed form to the address indicated below:

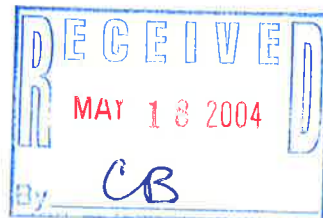
☐ Adjudication Bureau
Idaho Dept. of Water Resources
1301 N. Orchard St.
Boise, ID 83706-2237
Ph. 1/800/451-4129 or
FAX 208/327-5400

☐ Adjudication Bureau
Idaho Dept. of Water Resources
1341 Fillmore St., Ste. 200
Twin Falls, ID 83301-3380 or
FAX 208/736-3037

☐ Adjudication Bureau
Idaho Dept. of Water Resources
2735 Airport Way
Boise, ID 83705-5082
Ph. 208/334-2190 or
FAX 208/334-2348

☐ Adjudication Bureau
Idaho Dept. of Water Resources
900 N. Skyline, Ste A.
Idaho Falls, ID 83402-3653 or
FAX 208/525-7177

☒ Adjudication Bureau
Idaho Dept. of Water Resources
15 West Center Street
Soda Springs, ID 83276
Ph. 208/547-3993 or
FAX 208/547-3939



STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
CENTER FOR VITAL STATISTICS AND HEALTH POLICY
State of Idaho

CERTIFICATE OF DEATH

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR, WITH THE DEPT. OF HEALTH & WELFARE RAISED SEAL, SHALL BE USED AS PROOF FACE
EVIDENCE OF THIS DEATH UNDER IDAHO CODE 39-2401 & 39-241

State File No. _____
Local Reg. No. 153

DECEDENT

TYPE OR
PRINT IN
PERMANENT
BLACK INK
DO NOT USE
FELT TIP PEN

DECEDENT — NAME FIRST		MIDDLE		LAST		SEX	DATE OF DEATH (Month, Day, Year)
Ross		Boyd		Chandler		Male	Oct. 13, 2000
SOCIAL SECURITY NUMBER		AGE — Last Birthday (M, Y, D)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (Month, Day, Year)	BIRTHPLACE (City and State or Foreign Country)	
[REDACTED]		68			Sept. 29, 1932	Sterling, ID	
WAS DECEDENT EVER IN U.S. ARMED FORCES?		PLACE OF DEATH (Check only one)		HOSPITAL		OTHER	
☐ Yes ☒ No		(1) ☐ Inpatient		(4) ☐ Long-Term Care Facility		(6) ☐ Other Private Residence	
		(2) ☐ ER/Outpatient		(3) ☐ DOA		(5) ☒ Own Residence	
						(7) ☐ Other (Specify)	
FACILITY NAME AND ADDRESS (If not a hospital, enter name of place, street and number)				CITY, TOWN OR LOCATION OF DEATH		COUNTY OF DEATH	
422 E. 500 N.				Firth		Bingham	
MARITAL STATUS — Married, Never Married, Widowed, Divorced (Specify)		SURVIVING SPOUSE (If wife, give maiden name)		DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.)		KIND OF BUSINESS / INDUSTRY	
Married		LaFay Fallis		Industrial Mechanic		American Potato	
RESIDENCE STATE		COUNTY		CITY, TOWN OR LOCATION		STREET AND NUMBER	
ID		Bingham		Firth		422 E. 500 N.	
INSIDE CITY LIMITS?		WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes — If yes, specify Cuban, Mexican, Puerto Rican, etc.)		RACE — American Indian, Black, Japanese, White, etc. (Specify)		16. DECEDENT'S EDUCATION (Specify only highest grade completed)	
☐ Yes ☒ No		☐ Yes ☒ No		White		Elementary/Secondary (0-12) College (14 or 5+)	
		(Specify):					

PARENTS

FATHER — NAME	BIRTHPLACE	MOTHER — FULL MAIDEN NAME	BIRTHPLACE
Eugene Chandler	UT	Dora Savage	ID

INFORMANT

INFORMANT'S NAME (Type Print)	MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)
LaFay Fallis Chandler	422 E. 500 N. Firth, Idaho 83236

DISPOSITION

METHOD OF DISPOSITION	PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)	LOCATION — City or Town, State
☒ Burial ☒ Cremation ☐ Removal from Idaho	Southwest Idaho Crematory	Blackfoot, Idaho
☐ Donation ☐ Other (Specify)		

SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH	LICENSE NUMBER (of Licensee)	NAME AND ADDRESS OF FACILITY
Michael D. Anderson	M-809	Hawker, Hill, Sandberg Funeral Chapel 214 S. University, Blackfoot, ID 83221

TIME OF DEATH	DATE PRONOUNCED DEAD (Month, Day, Year)	WAS CASE REFERRED TO CORONER?	MANNER OF DEATH (Check One)
2:00 A.M.	Oct. 13, 2000	☒ Yes ☐ No	☒ Natural ☐ Homicide ☐ Suicide ☐ Accident
			☐ Pending Investigation ☐ Could Not Be Determined

27. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

IMMEDIATE CAUSE (Final disease or condition resulting in death)	IMMEDIATE CAUSE	Approximate Interval Between Onset and Death
	a. Chronic obstructive pulmonary disease	years
	b. DUE TO (or as a consequence of):	
	c. DUE TO (or as a consequence of):	
	d. DUE TO (or as a consequence of):	

CAUSE OF DEATH

Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (disease or injury that initiated events resulting in death) LAST

27. PART II. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part I.	WAS AN AUTOPSY PERFORMED?	WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH?
	☐ Yes ☒ No	☐ Yes ☐ No

CERTIFIER

DEATH WAS DUE TO OTHER THAN NATURAL CAUSES. THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE

CERTIFIER (Check only one)		
☐ PHYSICIAN — To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated.		
☒ CORONER — On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner as stated.		

SIGNATURE AND TITLE OF CERTIFIER	LICENSE NUMBER	DATE SIGNED (Month, Day, Year)
S. Doyle Jones		10-16-00
NAME AND ADDRESS OF CERTIFIER (Type Print)		
S. Doyle Jones, 501 N. Maple #303, Blackfoot, ID 83221		

TO BE USED FOR EXTERNAL CAUSES ONLY

DATE OF INJURY (Mo., Day, Yr.)	HOUR OF INJURY	DESCRIBE HOW INJURY OCCURRED
INJURY AT WORK?	IF TRANSPORTATION ACCIDENT, Specify	PLACE OF INJURY — At home, farm, street, factory, office building, etc. (Specify)
☐ Yes ☐ No	☐ Driver ☐ Passenger ☐ Pedestrian	
	☐ Other	

CORONER'S REVIEW AREA

CORONER'S ACTION	CORONER'S SIGNATURE	DATE SIGNED (Month, Day, Year)
I have reviewed and/or amended, and certified.		

REGISTRAR

REGISTRAR'S SIGNATURE	DATE FILED (Month, Day, Year)
Rafael Jeff	October 20, 2000

VITAL STATISTICS COPY

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED: October 20, 2000

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

JANE S. SMITH
STATE REGISTRAR



State of Idaho

DEPARTMENT OF WATER RESOURCES

15 West Center Street, Soda Springs, ID 83276

Phone: (208) 547-3993 Fax: (208) 547-3939 Web Site: www.idwr.state.id.us

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

La Fay Chandler
373 North 200 East
Blackfoot, Idaho 83221

April 27, 2004

REF: Snake River Basin Adjudication (SRBA)
Claim No.: A27-7376

Subject: Change in Address

Response Date: May 18, 2004

Dear Claimant(s),

According to Bingham County records, you still own the property referenced under the above listed water right and your address is no longer 422 East 500 North in Firth.

Before we can modify our records to reflect the change we need the change in address form completed and returned to our office.

We will need a copy of your warranty deed since there is not a copy on file. Also if you no longer want your husband listed on the claim we will need a copy of his death certificate before we can remove his name.

If you have any questions please feel free to contact me at 547-3993.

Respectfully,

A handwritten signature in cursive script that reads "Cindy E. Bird". The signature is written in dark ink and is positioned above the printed name and title.

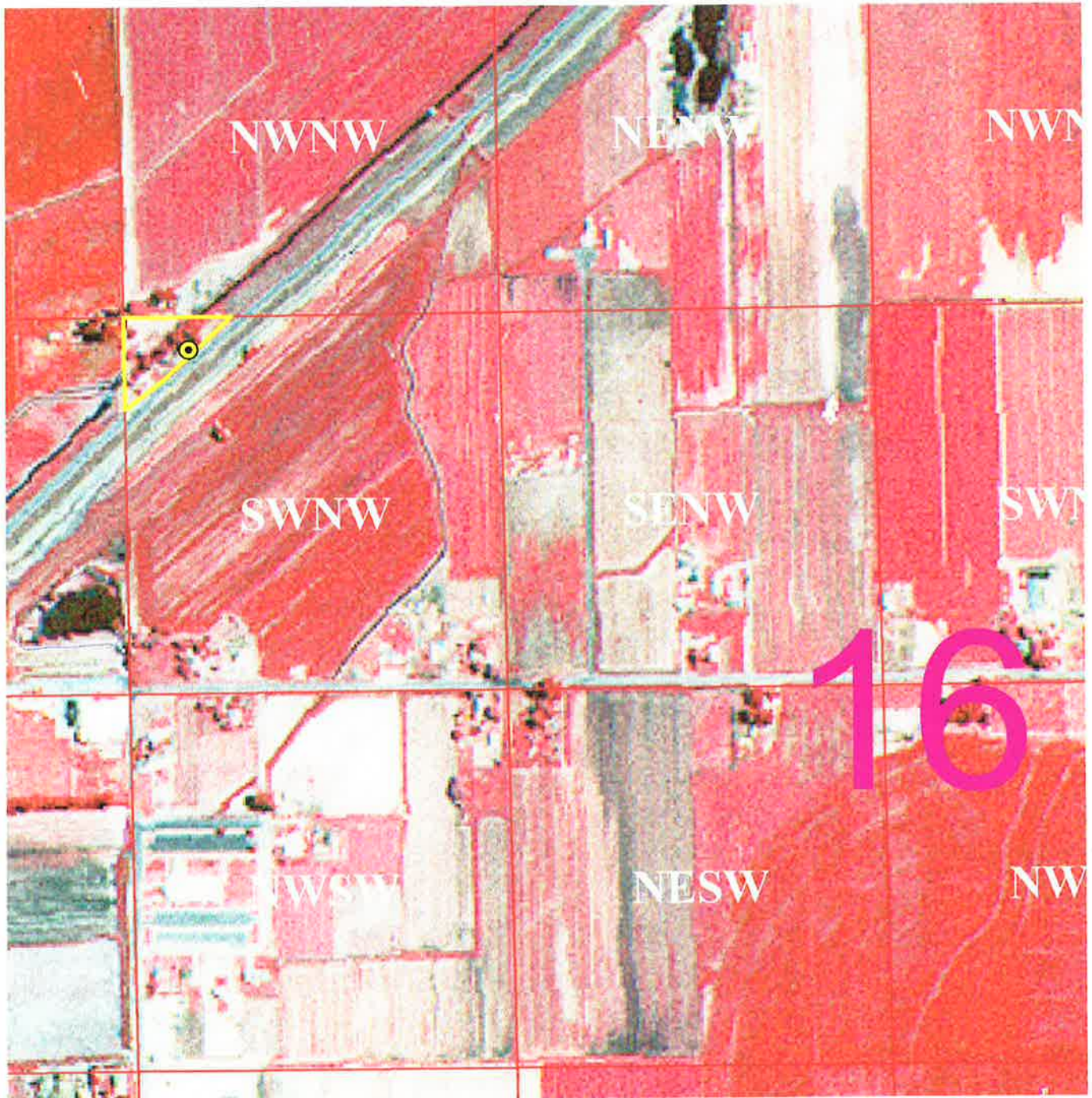
Cindy E. Bird
Adjudication Bureau

CEB/pb

Enclosure: change in address form

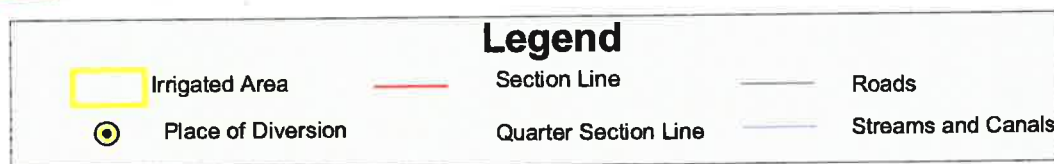
Water Right Claim Number 27-07376
Township , 2S36E

01/02/2001



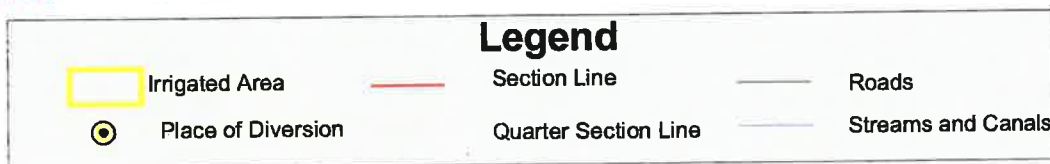
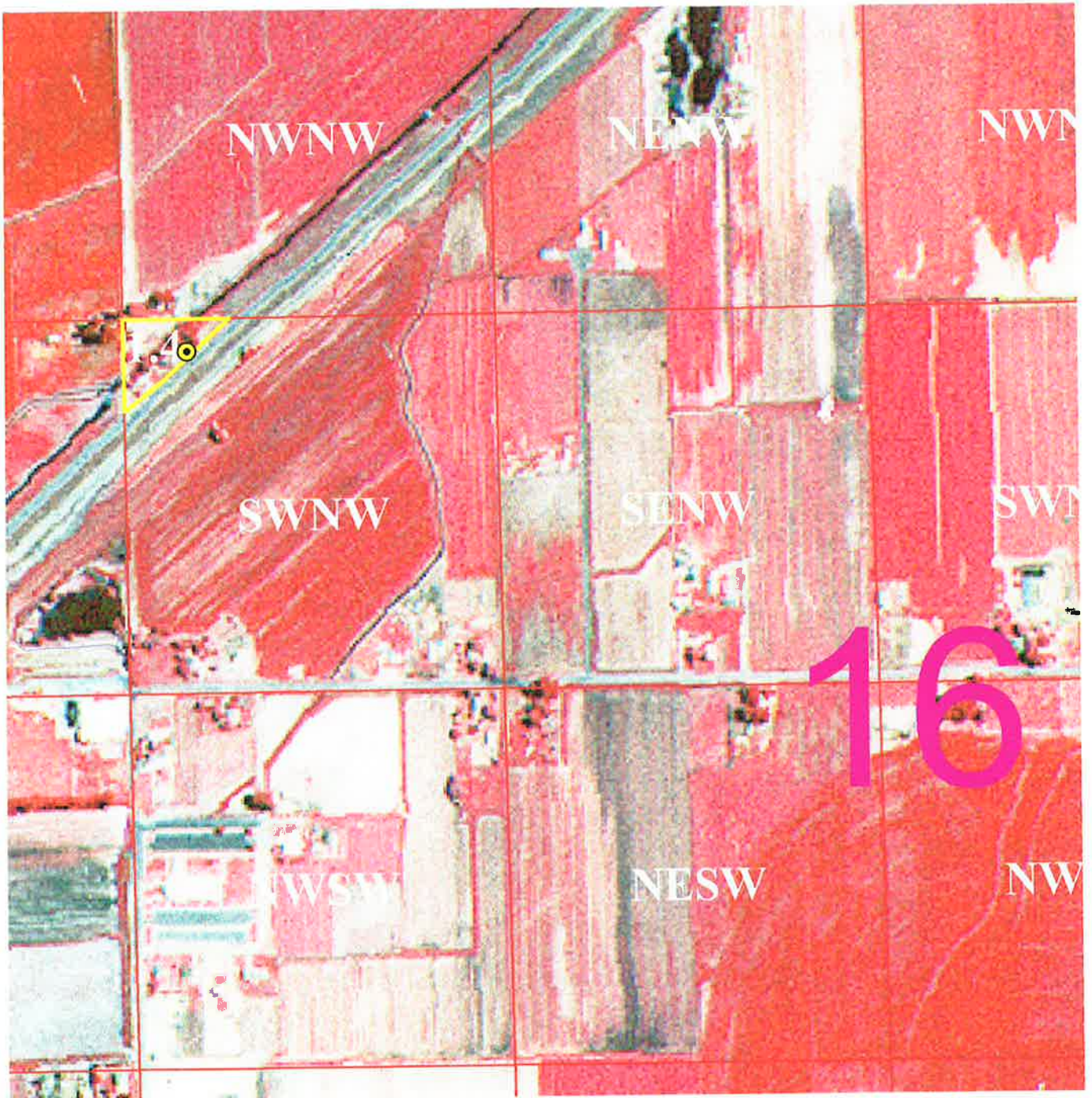
Water Right Claim Number 27-07376
Township , 2S36E

01/02/2001



Water Right Claim Number 27-07376
Township , 2S36E

01/02/2001



SCANNED

JUL 20 2001

Log for claim 27-07376

Spatial Dynamics LTD

1/2/01

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
02s36e	16	SWNW	1	1.4	
Totals:			1	1.4	

AMENDED

State of Idaho
Department of Water Resources

AMENDED

WATER RIGHT LICENSE

License of Water Right No. 27-7376 Priority June 27, 1983 Amount 0.06 cfs

THIS IS TO CERTIFY, that Ross B. &/or LaFay Chandler
of Firth, Idaho, has complied with the terms and conditions of Permit
No. 27-7376 issued pursuant to Application for Permit dated June 27, 1983,
and has submitted proof to the Department of Water Resources on September 12, 1985,
that he has applied water to a beneficial use; an examination by the Department indicates that the works have a
capacity for the diversion of 0.06 cfs of water from a groundwater source,
tributary to _____, and that the permit holder has applied to a beneficial use and
established a right to use water as follows:

Beneficial Use	Period of Use	Rate of Diversion	Annual Volume
Irrigation	from <u>April 1</u> to <u>November 1</u>	at <u>0.02</u> cfs and	<u>3.5</u> acre feet
Stockwater	from <u>January 1</u> to <u>December 31</u>	at <u>0.02</u> cfs and	<u>0.2</u> acre feet
Domestic (2 Unit)	from <u>January 1</u> to <u>December 31</u> (both dates inclusive)	at <u>0.06</u> cfs and	<u>2.4</u> acre feet

Subject, however, to the condition that no more than 0.06 cfs of water be diverted at any one time, and
that the amount of water so diverted and to which such right is entitled and confirmed is for the purpose
aforementioned and is limited to the amount which can actually be beneficially used and shall not exceed
6.1 acre feet per year, said waters to be diverted within the SW1/4NW1/4 Section 16,
Twp 2S, Rge 36E in the County of Bingham

Description and location of place of use:

Twp.	Range	Sec.	NE1/4				NW1/4				SW1/4				SE1/4				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	
2S	36E	16							1										1

Total number of acres irrigated 1

JUL 20 2001

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: A27-07376
Date Received: 3/29/1989
Receipt No: E006584
Received By: IPM

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROSS B. CHANDLER ✓ 208-785-3760
Address: 422 E. 500 N.
FIRTH, ID 83236

AND/OR

Name: LA FAY CHANDLER ✓ 208-785-3760
Address: 422 E. 500 N.
FIRTH, ID ✓ 83236

2. Date of Priority: JUN 27, 1983 ✓

3. Source: GROUNDWATER ✓ Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
02S ✓	36E ✓	16 ✓	SW ✓	NW ✓			BINGHAM ✓

5. Description of diverting works:
WELL, PIPE & SPRINKLER

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION ✓	04/01 ✓	11/01 ✓	0.020 ✓		3.5 AFA.
STOCKWATER ✓	01/01 ✓	12/31 ✓	0.020 ✓		0.2 AFA.
DOMESTIC ✓	01/01 ✓	12/31 ✓	0.060 ✓		2.4 AFA.

7. Total Quantity Appropriated is:
0.060 C.F.S. (and/or)

A.F.A.

8. Total consumptive use is 2.5 Acre Feet Per Annum.

9. Non-irrigation uses:
D/2 HOMES, S/2 HORSES.

A27-07376

Page 1

Date: 03/29/89

MICROFILMED

NOV 12 1992



10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
02S	36E	16	SW	NW		IRR	1.0
			SW	NW		DOMEST	
			SW	NW		STOCK	

Section Acres 1.0

Total Acres 1.0

11. Place of use in counties: BINGHAM

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

13. Other Water Rights Used:
N/A

14. Remarks:

15. Basis of Claim: LICENSE

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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1

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): Larry Chandler Date: Mar. 29-1989
Ross B. Chandler Date: 3-29-1989

State of Idaho)
County of BOONEVILLE) SS.

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

[Signature]
Notary Public

Residing at Idaho Falls
My Commission Expires 9-12-94



MICROFILMED

NOV 12 1992

A27-07376

