

02/22/2005

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

**RIGHT NUMBER: 27-10296**

NAME AND ADDRESS: KATHY DANIELS  
436 WEST RIVERTON ROAD  
BLACKFOOT ID 83221

DAVID A. DANIELS  
436 WEST RIVERTON ROAD  
BLACKFOOT ID 83221

SOURCE: BLACKFOOT RIVER TRIBUTARY: SNAKE RIVER

QUANTITY: 0.870 CFS

PRIORITY DATE: 05/01/1885

POINT OF DIVERSION:

T03S R35E S9 SWSENE Lot 1 Within BINGHAM County

PURPOSE AND  
PERIOD OF USE:

| <u>PURPOSE OF USE</u> | <u>PERIOD OF USE</u> | <u>QUANTITY</u> |
|-----------------------|----------------------|-----------------|
| IRRIGATION            | 04/01 10/31          | 0.870 CFS       |

PLACE OF USE: IRRIGATION Within BINGHAM County *✓*

|               |      |     |               |      |      |
|---------------|------|-----|---------------|------|------|
| T03S R35E S08 | SWNW | 3.1 | T03S R35E S08 | SENW | 27.7 |
|---------------|------|-----|---------------|------|------|

*✓*

30.8 ACRES TOTAL

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.

EXPLANATORY MATERIAL: **Decreed**

WATER IS DELIVERED THROUGH MINERS DITCH.

This right is a split from former right 27-3.



# STATE OF IDAHO

Department of Water Resources

Eastern Region



## Water Right(s) 27-10296



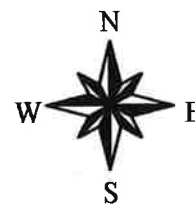
1000 0 1000 2000 Feet

IRRIGATED ACRES 30.8

### LEGEND

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

Place of Use: T3S, R35E:  
(part of) Sec. 8, SWNW, SENW.  
Point(s) of Diversion: T3S, R35E:  
Sec. 9, SWSENE.



GIS Place of Use Illustration  
1987/88 NAPP Photography  
Prepared by: B. Payne  
Date: February 2005

SCANNED

PROFILED

MAY 25 2006

11/09/2005

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

RIGHT NUMBER: 27-10296  
NAME AND ADDRESS: KATHY DANIELS  
436 WEST RIVERTON ROAD  
BLACKFOOT ID 83221  
  
DAVID A. DANIELS  
436 WEST RIVERTON ROAD  
BLACKFOOT ID 83221

**MIXED POUS:**

-THE PLACE OF USE IDENTIFIED BELOW CONTAINS  
BOTH PRIVATE AND PUBLIC LANDS.  
-USE IS ACTUALLY OCCURRING ON PRIVATE LAND  
AND SHOULD BE DESCRIBED USING LOTS.

SOURCE: BLACKFOOT RIVER

TRIBUTARY: SNAKE RIVER

QUANTITY: 0.870 CFS

PRIORITY DATE: 05/01/1885

POINT OF  
DIVERSION: T03S R35E S9 SWSENE Lot 1 Within BINGHAM County

PURPOSE AND  
PERIOD OF USE:

PURPOSE OF USE  
IRRIGATION

PERIOD OF USE  
04/01 10/31

QUANTITY  
0.870 CFS

PLACE OF USE: IRRIGATION Within BINGHAM County

**Mixed  
Ownership  
Descriptions**

T03S R35E S08 SWNW 3.1

T03S R35E S08 SENW 27.7

30.8 ACRES TOTAL

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.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Decreed

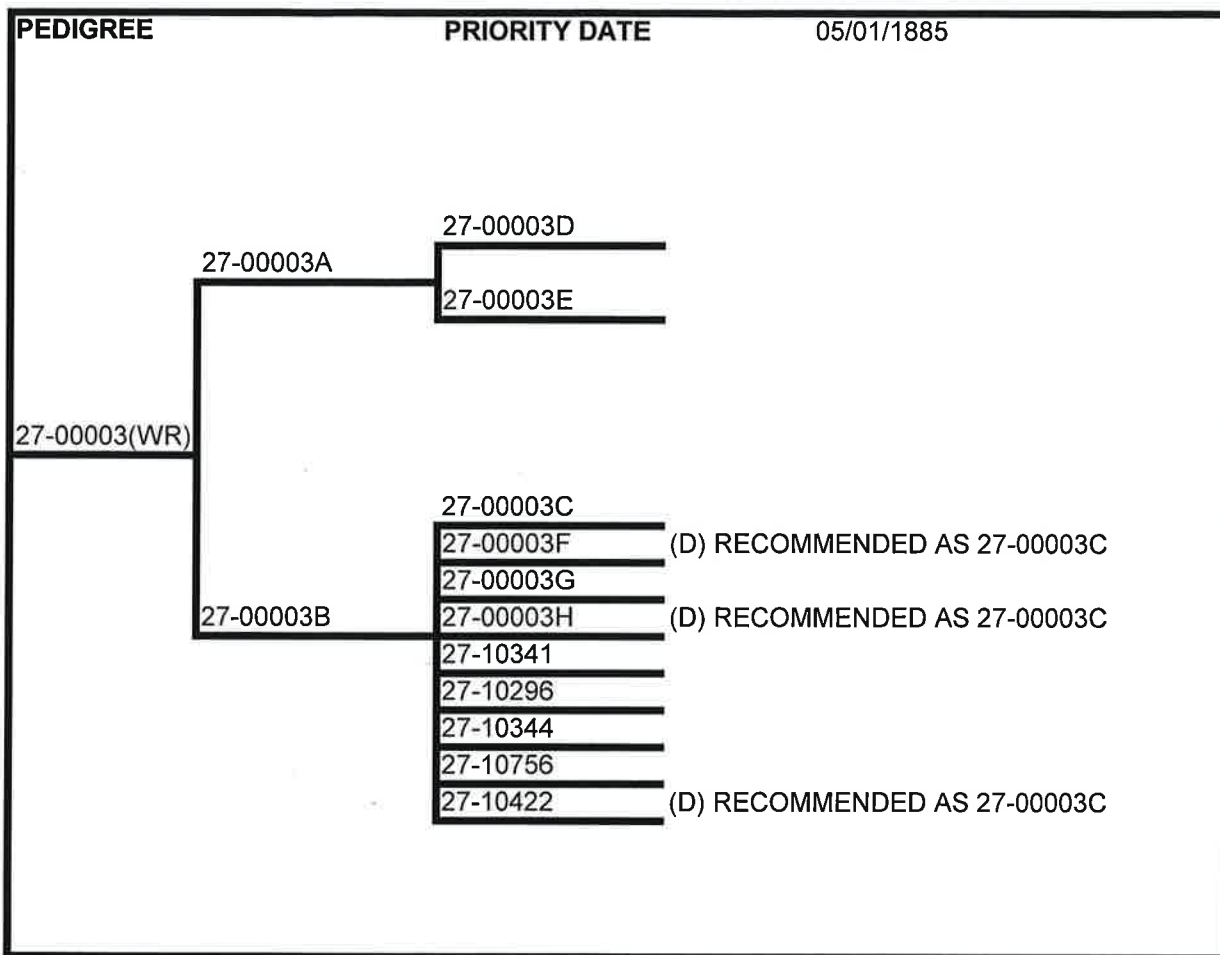
WATER IS DELIVERED THROUGH MINERS DITCH.

This right is a split from former right 27-3.

T03S R35E S08 Lot 4 (SWNW) 3.1

T03S R35E S08 Lot 2 (SEnw) 27.7

Clarifying SWNW as Lot 4 (SWNW) and SENW as Lot 2 (SEnw) would  
resolve BLM's objection



| Water right # | to adjudication # | Miscellaneous |                                     |
|---------------|-------------------|---------------|-------------------------------------|
| 27-00003      | 27-00003a         | 27-00003D     |                                     |
|               |                   | 27-00003E     |                                     |
|               | 27-00003b         | 27-00003C     |                                     |
|               |                   | 27-00003F     | DISALLOWED RECOMMENDED AS 27-00003C |
|               |                   | 27-00003G     |                                     |
|               |                   | 27-00003H     | DISALLOWED RECOMMENDED AS 27-00003C |
|               |                   | 27-10341      |                                     |
|               |                   | 27-10296      |                                     |
|               |                   | 27-10344      |                                     |
|               |                   | 27-10756      |                                     |
|               |                   | 27-10422      | DISALLOWED RECOMMENDED AS 27-00003C |

**PROFILED**

OWNED  
Jul 25 2006

**Claim Number Split to**

27-00003      27-00003A  
                    27-00003B

27-00003A    27-00003D  
                    27-00003E

27-00003B    27-00003C  
                    27-00003F  
                    27-00003G  
                    27-00003H  
                    27-10341  
                    27-10296  
                    27-10344  
                    27-10756

kmj 03/03/2006

02/22/2005

**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: 27-10296**

David A Daniels  
436 West Riverton Road  
Blackfoot, ID 83221  
Telephone Number: (208) 785-1284

Kathy Daniels  
436 West Riverton Road  
Blackfoot, ID 83221  
Telephone Number: (208) 785-1284

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: 7-11-05

SIGNATURE:

David A Daniels Kathy Daniels

Please print your name:

David A Daniels Kathy Daniels

IDWR Regional Office, 900 N Skyline Dr. Ste A, Idaho Falls, ID 83402, (208) 525-7161

2/20

INTER-DEPARTMENT MEMO

TO: File

SUBJECT: 27-10296

FROM: B. Payne

DATE: 2-15-05

Bengham County Assessors office

29.443 ac = irrigated

1.2 " = waste

Which outline do I follow for the layout?

snaps to bottom G.A. line. Follow image.  
ok bump on E side if trees or irrigated

2-16-05

5WNW 3.1

SE NW 27.7

30.8

signature

( ) For your information

( ) Response required

6578

SWNE

Figure 2  
# 522505

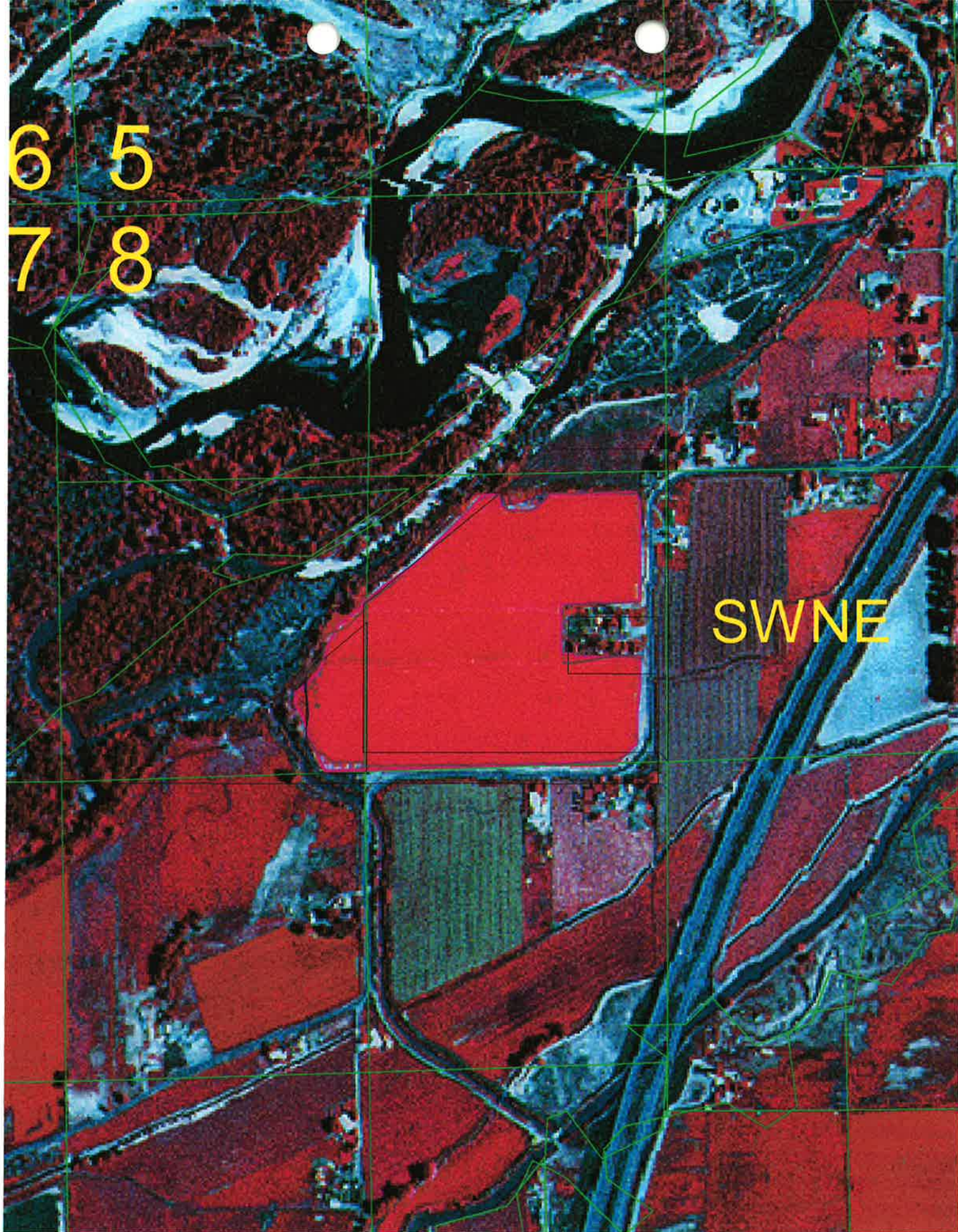
Bentley County, Oklahoma  
29.443 ac = irrigated  
1.2  
30.643

NAPP section  
3102

Warranty  
Date  
9-20-1956

6 5  
7 8

SWNE



Basin 27

| Basin No. | Sequence Number | Split Suffix | Description                          | R | D | Basis of a Claim | yyyy-mm-dd Priority Date | File Movement                                      | Remarks                                   | Y N/A Layout | Usage      | Other Water Rights Used | S=Stevens | Stevens Decree # | Total CFS |
|-----------|-----------------|--------------|--------------------------------------|---|---|------------------|--------------------------|----------------------------------------------------|-------------------------------------------|--------------|------------|-------------------------|-----------|------------------|-----------|
| 27        | 3               | G            | Bingham, Paul                        | R |   | Decreed          | 1885-05-01               | To Skip 8/13/03. To Cindy 3/9/04                   | Link to Stevens 27-3, 57, 29?             | Y            | irrigation |                         | s         | 3                | 0.10      |
| 27        | 10527           |              | Bingham, Paul                        |   | D | Decreed          | 1885-05-01               |                                                    | Claimed .109                              | N/A          | irrigation |                         | s         | 3                | 0.00      |
| 27        | 10296           |              | Daniels, Kathy & David               |   |   | Decreed          | 1885-05-01               |                                                    | Miner's Ditch; former owner Orris Lindsey |              | irrigation |                         | s         | 3                | 0.87      |
| 27        | 10341           |              | Haddon, Bill D.                      |   |   | Decreed          | 1885-05-01               |                                                    |                                           |              | irrigation |                         | s         | 3                | 0.09      |
| 27        | 3               | C            | Hill, Stanley & Cronquist, Susan     | R |   | Decreed          | 1885-05-01               | To Skip 12/28/04 To Cindy 1/28/05                  | T109. Originally claimed 2.0              | Y            | irrigation |                         | s         | 3                | 0.73      |
| 27        | 10756           |              | Hinderager, Larry (Wring, Linden M.) | R |   | Decreed          | 1885-05-01               | To Skip 3/8/04                                     |                                           | Y            | irrigation |                         | s         | 3                | 0.12      |
| 27        | 3               | D            | Reid, Casey W.                       |   |   | Decreed          | 1885-05-01               | To Skip 8/13/03. To Cindy 1/22/04. To Ernie 2/1/05 |                                           |              | irrigation |                         | s         | 3                | 0.57      |
| 27        | 3               | E            | Reid, Paul                           |   |   | Decreed          | 1885-05-01               | To Ernie 2/1/05                                    |                                           |              | irrigation |                         | s         | 3                | 0.43      |
| 27        | 3               | F            | Shupe, Paul                          |   | D | Decreed          | 1885-05-01               | To Skip 8/13/03.                                   | claimed 0.14 cfs                          | N/A          | irrigation |                         | s         | 3                | 0.00      |
| 27        | 10344           |              | Stark, David                         |   |   | Decreed          | 1895-05-01               |                                                    | Colson, Robert F:previous owner.          |              | irrigation |                         | s         | 3                | 0.09      |
|           |                 |              |                                      |   |   |                  |                          |                                                    |                                           |              |            |                         | 10        | 3                | 3.00      |

## INTER-DEPARTMENT MEMO

TO: BarbaraFROM: CindySUBJECT: layoutDATE: 2/6/05

Back in July I asked for a layout on this piece but I couldn't find one in the file.

Please create a layout using the plat map and deeds we received. It should be around 34 acres (maybe 35). POP: Miners Ditch! Verify with Bingham Co. tax lot information. ← see memo. BP

Also put a copy of the Robert Miller analysis in this file.

Claimant sold Corbetta Slough water to Jane Caldwell

( ) For your information

( ) Response required

signature CB

Ready for eCVR.

## INTER-DEPARTMENT MEMO

TO: BarbaraFROM: CindySUBJECT: Pou / layoutDATE: 7/23/04

Create the pou from the spatial map markup in the file. Also, you might use the warranty deed get the boundaries. David is going to send a survey plat that they had done.

Let me know the number of acres in the Pou. It should be about 34.

( ) For your information

☒ Response required

signature CB

## Notes

7/22/04. The per by spatial is 35.4 acres. Claimed 45 acres. Check with David tomorrow when he brings it to the office what the irrigated acres should be.

GCOB is incorrect on the legal NENW and it should be SENW.

7/23/04 David Daniels brought courthouse documents to the office to verify water. The documents seem to be in order to verify water.

Merlin Yancey also email documents, gave to Barbara to catalog in the book.

The number of acres irrigated under this right is only about 34. not 45. David will send over a copy of their survey plat. CB

8.3-04 Resurveyed survey plat. ~~not~~

2/6/05 The Corbette Slough water <sup>noted</sup> under this claim/deeds was conveyed to Gene Caldwell by David & Kathy McDaniel. They kept the 43 1/2' inches of Daniel Robert Mullin water. The water is conveyed thru miner's ditch, CB

~~that~~

## Notes

7/21/04 David & Kathy Daniels come into the office to bring in documents, ownership change, death certificate, marriage license, documents for gone cold well.

David said there water comes from the Lansing street well.

When Zane Caldwell purchased his property from David & Kathy they conveyed only Cobble Slough water. He didn't get any Blackfoot River water (27-10296).

Albert & Magdalena Hofer is Billy Lindsay's parents.

David & Kathy are going to the courthouse to find documents back to the decreed right.

NOTE: --PWS - we need to remove the property sold to Zane Caldwell.

7/21/04 2:00pm - Skip - The permit has not been approved. We must recommend the pump on the river. They didn't put all the water in the Lansing St. Well.

4pm Kathy called from the courthouse to see if the document Bill Haddon submitted would be sufficient.. I tried to call them back but the answering machine cut me off.

7/22/04 Sent some old warranty deeds to the Daniels. CB

## Notes

10-1-03 → Need a copy of the decree  
an new sheets in the file CB

6/7/04 file contains warranty deed from  
Albert & Magdalena Profer to Chris &  
Lilly Lindsay and it conveyed 43  $\frac{1}{3}$  inches  
of Miller water.

7/13/04 - LaVonne Steukler came in and  
Kathy remarried. and they built a  
new house behind the house. Zane  
Caldwell purchased this home only.

2:38am left a message at 785-1284 about calling  
me on this claim. I'm not sure who will  
call back. CB

We did an internet search and found Kathy &  
David Daniels has that phone number. So I  
set an ownership's change form. and Zane Caldwell  
purchased the old house (only) So the address  
for Kathy also changed when they built a new home.

7/14/04 David Daniels called back and said they  
sold the house and Zane to Zane Caldwell.  
He is irigator for Zane. I asked him to provide  
me a copy of Orris's death certificate, marriage  
license, plat, warranty deed, copy of Zane's warranty  
deed CB

**Bird, Cindy**

---

**To:** Merlin Yancey (E-mail)  
**Subject:** Lindsey documents

27-10296  
Daniel Daniels

good afternoon,

After reviewing the documents you sent for Lindsey's. I need more information. The documents you sent does not provide that they have water.

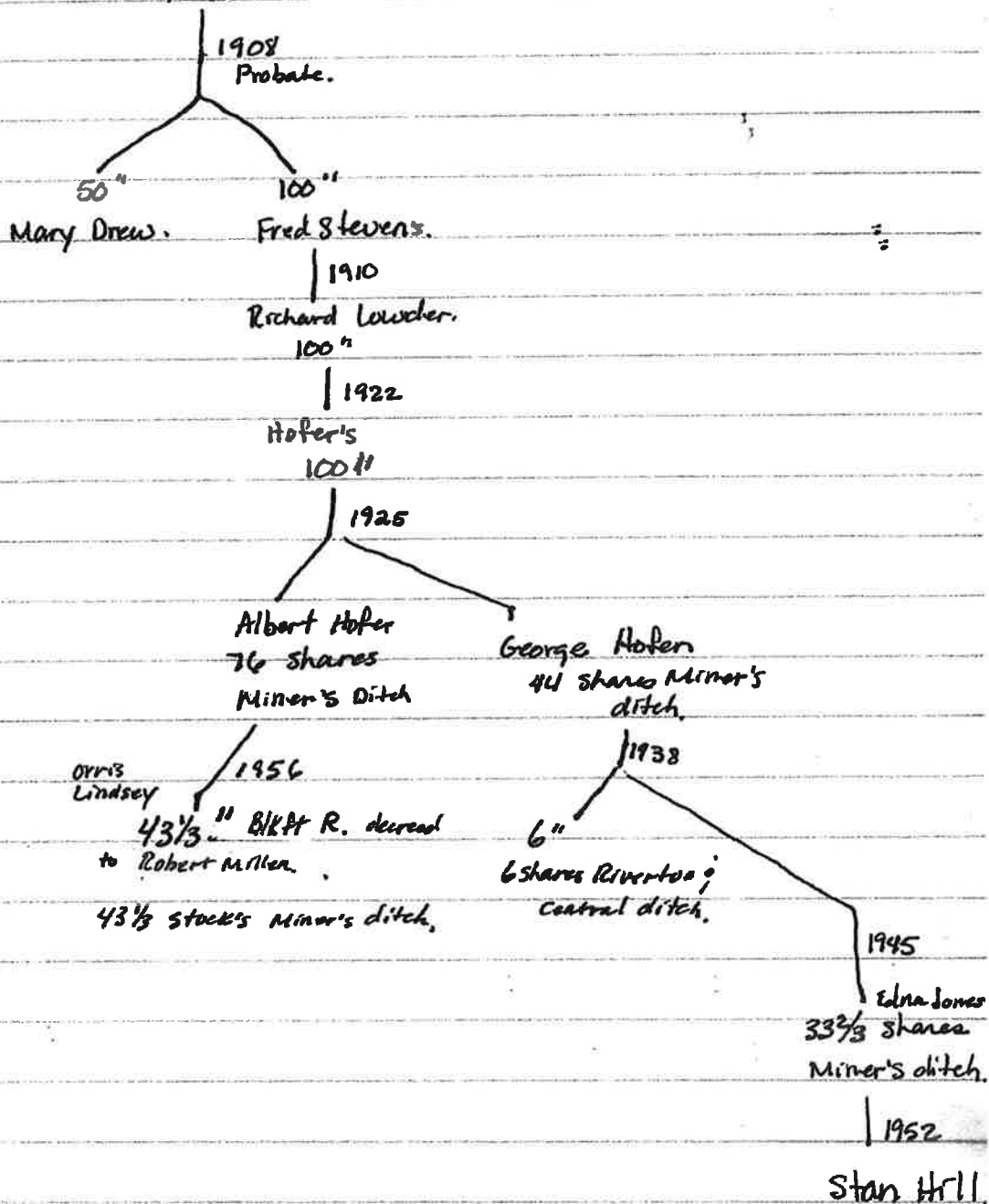
1. 1922: Hofer's purchased the property from Lowder with 100 inches of Robert Millen Water.
2. 1925: Albert Hofer got 76 shares in the Miner's ditch and George Hofer got 44 shares in the Miner's ditch. On the very same day Albert and George split the land that they all purchased Richard Lowder 3 years earlier.

That totals 120 shares? They only had 100 inches. Where did the other 20 inches come from?

Thanks,  
Cindy

150" Robert Milten.

27-10296



522505

## WARRANTY DEED

For Value Received **Kathy J. Lindsay** now known as **Kathy J. Daniels and David Daniels, wife and husband**

Hereinafter called the Grantor, hereby grants, bargains, sells and conveys unto

**Zane W. Caldwell and Martha Marlene Caldwell, husband and wife**

whose address is: **442 West Riverton Road, Blackfoot, ID 83221**

Hereinafter called the Grantee, the following described premises situated in **Bingham County, Idaho**, to-wit:

Part of the SE $\frac{1}{4}$ NW $\frac{1}{4}$  of Section 8, Township 3 South, Range 35 E.B.M., Bingham County, Idaho, described as follows: Beginning at a point that is S. 89°55'10" E. 2618.74 feet along the E-W center section line to the center of said Section 8, and N. 0°10'47" E. 491.40 feet along the N-S center section line of said Section 8 to the point of beginning from the W $\frac{1}{4}$  corner of said Section 8, and running thence N. 89°55'10" W. 394.75 feet; thence N. 0°10'47" E. 249.93 feet; thence S. 89°55'10" E. 394.75 feet to said N-S center section line; thence S. 0°10'47" W. 249.93 feet to the point of beginning, EXCEPT county road along the East side.

RESERVING

UNTO GRANTORS **An Easement to maintain, replace, or repair an irrigation main line along the North, South and East side of the above described property. The above mentioned East side is along the west right-of-way of Riverton Road, approximately 50 feet more or less west of the East deed line described above.**

SUBJECT TO all easements, right of ways, covenants, restrictions, reservations, applicable building and zoning ordinances and use regulations and restrictions of record, and payment of accruing present year taxes and assessments as agreed to by parties above.

TO HAVE AND TO HOLD the said premises, with its appurtenances unto the said Grantee and to the Grantee's heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee, that the Grantor is the owner in fee simple of said premises; that said premises are free from all encumbrances except current years taxes, levies, and assessments, and except U. S. Patent reservations, restrictions, easements of record, and easements visible upon the premises, and that Grantor will warrant and defend the same from all claims whatsoever.

Dated: February 7, 2003

  
Kathy J. Daniels  
  
David Daniels

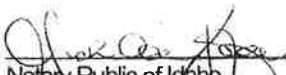
RECORDED AT THE REQUEST OF  
2003 FEB - 7 PM 2:00  
FEE 3.00 DEP 4.00  
BINGHAM COUNTY, IDAHO  
BLACKFOOT, IDAHO

STATE OF Idaho )

) ss.

COUNTY OF BINGHAM )

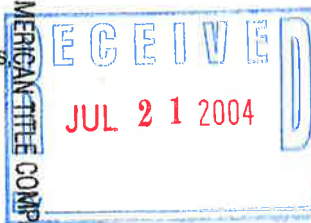
On this 7th day of February, 2003, before me Michelle Kofoed, personally appeared Kathy J. Daniels and David Daniels known or identified to me (or proved to me on the oath of), to be the person(s) whose name(s) are subscribed to the within instrument, and acknowledged to me that they executed the same.

  
Notary Public of Idaho  
Residing at: Blackfoot, Idaho



522505

FIRST AMERICAN TITLE COMPANY



9-20-1956

## WARRANTY DEED

\*\*\*\*

Albert Hofer and Magdalena  
Hofer, husband and wife

TO

Orris R. Lindsay and Lilly H.  
Lindsay, husband and wife

\*\*\*\*\*

Dated- September 20th, 1956-

Consideration- \$11,478.00-

Recorded- October 1st, 1956 at 3:20 P.M., in-

Book "94" of Deeds at Page 82 under Recorder's-

Fee No. 49935 of the records of Bingham County, Idaho-

Witness-

Robert M. Kerr Jr.

Albert Hofer

Magdalena Hofer

Acknowledged by Albert Hofer and Magdalena Hofer, husband and wife,  
September 29th, 1956 before Robert M. Kerr Jr., a Notary  
Public of Idaho, residing at Blackfoot, Idaho. Sealed.

## DESCRIPTION and REMARKS

The first parties do hereby grant, bargain, sell and convey and confirm unto the second parties, and to their heirs and assigns, forever, all the following described real estate, situated in Bingham County, Idaho, to-wit:

That portion of Lot 4 of Section 8 in Township 3 South, Range 35 E.B.M., in Idaho, described as follows: Beginning at the Southeast corner of said Lot 4, thence West 256 feet, thence North 440 feet, thence North 50°30' East 348 feet; thence South 651 feet to the place of beginning; Also that portion of Lot 2 of said Section 8, described as follows: Beginning at the center of said Section 8, thence North 1375 feet, thence West 505 feet, thence South 50°30' West 1075 feet, thence South 651 feet, thence East 1300 feet to the place of beginning, together with all ditches, ditch rights of way, water and water rights thereunto belonging including particularly 43 and 1/3 inches of the waters of Blackfoot River out of that 150 inches of the waters of Blackfoot River decreed to Robert Millan with a priority date of May 1, 1885, under a decree dated August 1, 1891 and recorded in Judgment Book No. 1 at pages 107 to 116 of the records of Bingham County, Idaho, and 43 and 1/3 shares of the capital stock of the Miners Ditch Co., Inc.

Subject to easements and rights of way, reservations in federal patents and state deeds, to taxes and assessments for the year 1956, and to any lien or encumbrance assumed, suffered or occasioned by the parties of the second part.

To Have and To Hold in the quiet and peaceable possession of the said second parties, their heirs and assigns forever, and the said first parties herein will warrant and forever defend.

MICROFILMED

\$12.65 I. R.S. Attached and Cancelled

NOV 12 1992

FLB 79

# Invoice

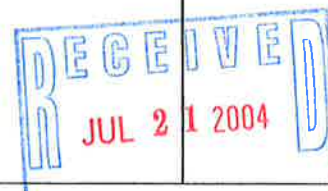
Corbett Slough Ditch Company  
78 North 100 West  
Blackfoot, ID 83221

| DATE      | INVOICE # |
|-----------|-----------|
| 1/27/2004 | 303       |

|                                                                |
|----------------------------------------------------------------|
| <b>BILL TO</b>                                                 |
| Zane Caldwell<br>442 West Riverton Road<br>Blackfoot, ID 83221 |

| P.O. NO. | TERMS            | PROJECT |
|----------|------------------|---------|
|          | Due Upon Receipt |         |

| QUANTITY              | DESCRIPTION              | RATE         | AMOUNT  |
|-----------------------|--------------------------|--------------|---------|
| 1                     | Certification Change Fee | 15.00        | 15.00   |
| Cert # 2992 Shares .4 |                          | <b>Total</b> | \$15.00 |



94 82

THIS INDENTURE, made this 20th day of September, 1956,  
between ALBERT HOFER and MAGDALENA HOFER, husband and wife,  
of the County of Bingham, State of Idaho,  
the parties of the first part and ORRIS R. LINDSAY and LILLY H. LINDSAY,  
husband and wife,

of the County of Bingham, State of Idaho, the parties of the second part,  
WITNESSETH, that the said parties of the first part, for and in consideration of the sum of  
Eleven Thousand Four Hundred Seventy-eight and no/100----- Dollars  
lawful money of the United States of America \* \* \*  
to them in hand paid by the parties of the second part, the receipt whereof is hereby acknowledged,  
have granted, bargained, sold, and by these presents, do grant, bargain, sell and convey and confirm unto  
the said parties of the second part, and to their heirs and assigns, forever, all the following described  
real estate, situated in the County of Bingham,  
State of Idaho, to-wit:

That portion of Lot Four of Section Eight in  
Township Three South, Range Thirty-five East  
of Boise Meridian, in Idaho, described as follows:  
Beginning at the Southeast corner of said Lot Four,  
thence West 256 feet, thence North 440 feet, thence  
North 50°30' East 348 feet; thence South 651 feet  
to the place of beginning; Also that portion of Lot  
Two of said Section Eight, described as follows:  
Beginning at the center of said Section Eight, thence  
North 1375 feet, thence West 505 feet, thence South  
50°30' West 1075 feet, thence South 651 feet, thence  
East 1300 feet to the place of beginning, together  
with all ditches, ditch rights of way, water and  
water rights thereunto belonging including particu-  
larly forty-three and one-third inches of the waters  
of Blackfoot River out of that one hundred fifty inches  
of the waters of Blackfoot River decreed to Robert Millan  
with a priority date of May 1, 1885, under a decree  
dated August 1, 1891 and recorded in Judgment Book No. 1  
at pages 107 to 116 of the records of Bingham County,  
Idaho, and forty-three and one-third shares of the  
capital stock of the Miners Ditch Co., Inc.

Subject to easements and rights of way, reservations in federal patents  
and state deeds, to taxes and assessments for the year 1956, and to  
any lien or encumbrance assumed, suffered or occasioned by the parties  
of the second part.

TOGETHER with all and singular the tenements, hereditaments and appurtenances thereunto belong-  
ing or in anywise appertaining, and the reversion and reversions, remainder and remainders, and rents, issues  
and profits thereof; and all estate, right, title and interest in and to the said property, as well in law as in equity,  
of the said parties of the first part.

TO HAVE AND TO HOLD, all and singular the above mentioned and described premises together  
with the appurtenances unto the parties of the second part, and to their heirs and assigns forever.  
And the said parties of the first part, and their heirs, the said premises in the quiet and peaceable  
possession of the said parties of the second part, their heirs and assigns, against the said parties  
of the first part, and their heirs, and against all and every person and persons whomsoever, lawfully  
claiming or to claim the same shall and will warrant and by these presents forever defend.

IN WITNESS WHEREOF, the said parties of the first part have hereunto set their hands  
and seals the day and year first above written.

Executed and Delivered in the Presence of

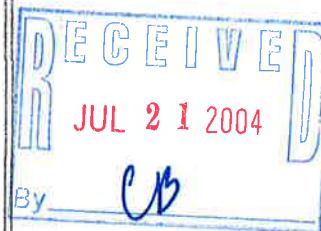
*Robert Millan*

*Albert Hofer*  
*Magdalena Hofer*

[SEAL]

[SEAL]

[SEAL]



Vital Statistics  
PO Box 83720  
Boise, ID 83720-0036

# STATE OF IDAHO

County of BINGHAM

No. 1080

## Marriage License

Instrument No. 496785

KNOW ALL PERSONS BY THIS CERTIFICATE: That any regularly ordained minister of the Gospel, authorized by the rites and usages of the church or denomination of Christians, Hebrews, or religious body of which said minister is a member, or any judge or magistrate, or competent officer to whom this may come, not knowing of any lawful impediments thereto, is hereby authorized and empowered to solemnize the rites of Matrimony between:

### GROOM

AND

### BRIDE

Name: DAVID ARNOLD DANIELS  
Address: BLACKFOOT, BINGHAM County, IDAHO  
Age: 61 Race: WHITE Status: DIVORCED  
Birthdate: 11/28/1939  
Birthplace: CALDWELL, TEXAS USA

Name: KATHY JEAN LINDSAY  
Address: BLACKFOOT, BINGHAM County, IDAHO  
Age: 58 Race: WHITE Status: WIDOWED  
Maiden name if previously married: HAWKER  
Birthdate: 4/7/1942  
Birthplace: IDAHO FALLS, IDAHO USA

And to certify the same to said parties, or either of them under the signature and seal, of said minister or official capacity, and thereupon is required to deliver the original to the parties so married.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at  
BLACKFOOT, BINGHAM County, IDAHO this 26th day of January, 2001

JUDIE HAMPTON Recorder

Deputy Recorder

## Marriage Certificate

I, Kathryn A. Sticklen, a District Judge  
residing in the city of Boise, in the county of Ada, in the state of  
Idaho do certify that, in accordance with the authority on me conferred by the above license, I did on this 26th day  
of January in the year A.D. 2001 in the city of \_\_\_\_\_ in  
the county of Ada, in the state of Idaho, solemnize the rites of matrimony between

DAVID ARNOLD DANIELS of BLACKFOOT, in the county of BINGHAM, of the state of IDAHO

and KATHY JEAN LINDSAY of BLACKFOOT, in the county of BINGHAM, of the state of IDAHO

in the presence of Roddy Allen and Douglas Chase  
WITNESS my hand at the county aforesaid, this 26th day of January, A.D. 2001.

In the presence of Roddy Allen Official's Signature Kathryn A. Sticklen  
Doug Chase Official's Mailing Address 514 W. Jefferson  
and Boise, Idaho 83702

(This copy for the Bride and Groom)

COPY



# CERTIFICATION OF VITAL RECORD

## 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 PRIMA FACIE EVIDENCE OF THIS DEATH UNDER IDAHO CODE 20-2100 & 20-212

State File No. \_\_\_\_\_  
Local Reg. No. 140

|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------|
| DECEDENT                            | DECEDENT — NAME                                                                                                                                                                                                     |  | FIRST                                                                                                                      |        | MIDDLE                                                                                                |              | LAST                                                                                                                                             |                                  | SEX                                                                                               | DATE OF DEATH (Month, Day, Year) |
|                                     | <u>Onnis</u>                                                                                                                                                                                                        |  | <u>Roy</u>                                                                                                                 |        | <u>Lindsay</u>                                                                                        |              |                                                                                                                                                  |                                  | <u>Male</u>                                                                                       | <u>September 8, 1999</u>         |
|                                     | SOCIAL SECURITY NUMBER                                                                                                                                                                                              |  | AGE — Last Birthday (Yr.)                                                                                                  | MONTHS | DAYS                                                                                                  | UNDER 1 YEAR | UNDER 1 DAY                                                                                                                                      | DATE OF BIRTH (Month, Day, Year) | BIRTHPLACE (City and State or Foreign Country)                                                    |                                  |
|                                     | [REDACTED]                                                                                                                                                                                                          |  | <u>75</u>                                                                                                                  |        |                                                                                                       |              |                                                                                                                                                  | <u>June 24, 1924</u>             | <u>Moreland, Idaho</u>                                                                            |                                  |
| PARENTS                             | WAS DECEDENT EVER IN U.S. ARMED FORCES?                                                                                                                                                                             |  | PLACE OF DEATH (Check only one)                                                                                            |        | HOSPITAL                                                                                              |              | OTHER                                                                                                                                            |                                  | FACILITY NAME AND ADDRESS (If not a hospital, enter name of place, street and number)             |                                  |
|                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                 |  | (1) <input type="checkbox"/> Inpatient                                                                                     |        | (2) <input type="checkbox"/> ER/Outpatient (3) <input type="checkbox"/> DOA                           |              | (4) <input type="checkbox"/> Long-Term Care Facility (5) <input checked="" type="checkbox"/> Own Residence                                       |                                  | (6) <input type="checkbox"/> Other Private Residence (7) <input type="checkbox"/> Other (Specify) |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| INFORMANT                           | FATHER — NAME                                                                                                                                                                                                       |  | BIRTHPLACE                                                                                                                 |        | MOTHER — FULL MAIDEN NAME                                                                             |              | BIRTHPLACE                                                                                                                                       |                                  | CITY, TOWN OR LOCATION OF DEATH                                                                   |                                  |
|                                     | <u>Wallace Lindsay</u>                                                                                                                                                                                              |  | <u>Eden, Utah</u>                                                                                                          |        | <u>Bertha Crouch</u>                                                                                  |              | <u>Freedom, WY</u>                                                                                                                               |                                  | <u>Blackfoot</u>                                                                                  |                                  |
|                                     | MARRITAL 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                                                                                                                      |                                  | COUNTY OF DEATH                                                                                   |                                  |
|                                     | <u>Married</u>                                                                                                                                                                                                      |  | <u>Kathy Hawker Quinones</u>                                                                                               |        | <u>Electronic Supply Mgr</u>                                                                          |              | <u>U.S. Government</u>                                                                                                                           |                                  | <u>Bingham</u>                                                                                    |                                  |
| DISPOSITION                         | RESIDENCE STATE                                                                                                                                                                                                     |  | COUNTY                                                                                                                     |        | CITY, TOWN OR LOCATION                                                                                |              | STREET AND NUMBER                                                                                                                                |                                  | ZIP CODE                                                                                          |                                  |
|                                     | <u>Idaho</u>                                                                                                                                                                                                        |  | <u>Bingham</u>                                                                                                             |        | <u>Blackfoot</u>                                                                                      |              | <u>442 W. Riverton Road</u>                                                                                                                      |                                  | <u>83221</u>                                                                                      |                                  |
|                                     | 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)                                        |              | DECEDENT'S EDUCATION (Specify only highest grade completed)                                                                                      |                                  |                                                                                                   |                                  |
|                                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                 |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                        |        | <u>White</u>                                                                                          |              | Elementary/Secondary (0-12) <u>1</u>                                                                                                             |                                  | College (1-4 or 5+) <u>1</u>                                                                      |                                  |
| CAUSE OF DEATH                      | FATHER — NAME                                                                                                                                                                                                       |  | BIRTHPLACE                                                                                                                 |        | MOTHER — FULL MAIDEN NAME                                                                             |              | BIRTHPLACE                                                                                                                                       |                                  | CITY, TOWN OR LOCATION OF DEATH                                                                   |                                  |
|                                     | <u>Wallace Lindsay</u>                                                                                                                                                                                              |  | <u>Eden, Utah</u>                                                                                                          |        | <u>Bertha Crouch</u>                                                                                  |              | <u>Freedom, WY</u>                                                                                                                               |                                  | <u>Blackfoot</u>                                                                                  |                                  |
|                                     | MARRITAL 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                                                                                                                      |                                  | COUNTY OF DEATH                                                                                   |                                  |
|                                     | <u>Married</u>                                                                                                                                                                                                      |  | <u>Kathy Hawker Quinones</u>                                                                                               |        | <u>Electronic Supply Mgr</u>                                                                          |              | <u>U.S. Government</u>                                                                                                                           |                                  | <u>Bingham</u>                                                                                    |                                  |
| CERTIFIER                           | METHODOF DISPOSITION                                                                                                                                                                                                |  | PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)                                                         |        | LOCATION — City or Town, State                                                                        |              | SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH                                                                                   |                                  | LICENSE NUMBER (of Licensee)                                                                      |                                  |
|                                     | <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from Idaho                                                                                           |  | <u>Grove City Cemetery</u>                                                                                                 |        | <u>Blackfoot, Idaho</u>                                                                               |              | <u>Kevin J. Dietrich</u>                                                                                                                         |                                  | <u>M-748</u>                                                                                      |                                  |
|                                     | <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)                                                                                                                                          |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| TO BE USED FOR EXTERNAL CAUSES ONLY | TIME OF DEATH                                                                                                                                                                                                       |  | DATE PRONOUNCED DEAD (Month, Day, Year)                                                                                    |        | WAS CASE REFERRED TO CORONER?                                                                         |              | MANNER OF DEATH (Check One)                                                                                                                      |                                  | APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH                                                      |                                  |
|                                     | <u>1:40 a.m.</u>                                                                                                                                                                                                    |  | <u>Sept. 8, 1999</u>                                                                                                       |        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                   |              | <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Accident |                                  | <u>2 years</u>                                                                                    |                                  |
|                                     | IMMEDIATE CAUSE (Final disease or condition resulting in death)                                                                                                                                                     |  | IMMEDIATE CAUSE                                                                                                            |        | DUE TO (or as a consequence of):                                                                      |              | DUE TO (or as a consequence of):                                                                                                                 |                                  | DUE TO (or as a consequence of):                                                                  |                                  |
|                                     | <u>alzheimer's dementia</u>                                                                                                                                                                                         |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| CORONER'S REVIEW AREA               | 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. |  | 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?                                                                           |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                   |              | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                         |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| REGISTRAR                           | CERTIFIER (Check only one)                                                                                                                                                                                          |  | SIGNATURE AND TITLE OF CERTIFIER                                                                                           |        | LICENSE NUMBER                                                                                        |              | DATE SIGNED (Month, Day, Year)                                                                                                                   |                                  |                                                                                                   |                                  |
|                                     | <input checked="" type="checkbox"/> 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.                                             |  | <u>Andrew N. Bulley MD</u>                                                                                                 |        | <u>M-6241</u>                                                                                         |              | <u>13 Sep 99</u>                                                                                                                                 |                                  |                                                                                                   |                                  |
|                                     | <input type="checkbox"/> 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.                      |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| DATE ISSUED                         | NAME AND ADDRESS OF CERTIFIER (Type/Print)                                                                                                                                                                          |  | DATE OF INJURY (Mo, Day, Yr)                                                                                               |        | HOUR OF INJURY                                                                                        |              | DESCRIBE HOW INJURY OCCURRED                                                                                                                     |                                  |                                                                                                   |                                  |
|                                     | <u>Dr. Andrew Bradbury 96 Poplar Blackfoot, Idaho 83221</u>                                                                                                                                                         |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| DATE ISSUED                         | INJURY AT WORK?                                                                                                                                                                                                     |  | IF TRANSPORTATION ACCIDENT, Specify                                                                                        |        | PLACE OF INJURY — At home, farm, street, factory, office building, etc. (Specify)                     |              | LOCATION (Street or Route Number, City, Town, or County, and State)                                                                              |                                  |                                                                                                   |                                  |
|                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                            |  | <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian                     |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
| DATE ISSUED                         | CORONER'S ACTION                                                                                                                                                                                                    |  | CORONER'S SIGNATURE                                                                                                        |        | DATE SIGNED (Month, Day, Year)                                                                        |              | REGISTRAR'S SIGNATURE                                                                                                                            |                                  | DATE FILED (Month, Day, Year)                                                                     |                                  |
|                                     | 31a. I have reviewed and/or amended, and certified.                                                                                                                                                                 |  | <u>Rafael Neff</u>                                                                                                         |        | <u>September 15, 1999</u>                                                                             |              | <u>Rafael Neff</u>                                                                                                                               |                                  | <u>September 15, 1999</u>                                                                         |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |
|                                     |                                                                                                                                                                                                                     |  |                                                                                                                            |        |                                                                                                       |              |                                                                                                                                                  |                                  |                                                                                                   |                                  |

VITAL STATISTIC 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: September 15, 1999

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

JANE S. SMITH  
STATE REGISTRAR

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

**Claim Number(s):**

A27-10296

**Previous Mailing Address:**

442 W. Riverton Rd

Blackfoot ID 83221

**New Mailing Address:**

436 W. Riverton Rd

Blackfoot ID 83221

**Telephone Number:**

(208) 785-1284

**Signature of Claimant(s):**

David A. Daniel

Kathy Daniels

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**

**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](http://www.idwr.state.id.us)

July 13, 2004

**DIRK KEMPTHORNE**  
Governor

**KARL J. DREHER**  
Director

Kathy Lindsey-Daniels  
436 W. Riverton Rd  
Blackfoot, ID 83221

Ref: Snake River Basin Adjudication (SRBA)  
Claim A27-10296

Subject: Ownership update

RESPONSE DATE: JULY 27, 2004

Dear Kathy;

IDWR records currently show the following name and address for the Notice of Claim listed above:

Orris R. Lindsey  
Kathy Lindsey  
442 W. Riverton Rd  
Blackfoot, ID 83221

If the information shown above is incorrect, then please complete the enclosed Change in Ownership form with a copy of Orris R. Lindsey's death certificate and your marriage certificate to David Daniels. Also please include a copy of your warranty deed and a copy of the plat map with your property highlighted. Make sure you sign the form on line 7. If the property and water right is split then please complete line 6 of this form.

This office must receive your response by the above response date. If proper notice of a change in address/ownership is not received, then all legal notices required by IDWR to mail to the claimant will be sent to the owner/address listed on the current Notice of Claim. This notice will be deemed legally sufficient notice.

If you have any additional questions please feel free to contact me in the Soda Springs office at 547-3993.

Respectfully,

Cindy E. Bird

Enclosure: ADDRESS FM Revised 2/10/2004  
Notice of Change in Water Right Ownership form 42-248/42-1409(6) July 2000.



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](http://www.idwr.state.id.us)

**DIRK KEMPTHORNE**  
Governor

**KARL J. DREHER**  
Director

July 14, 2004

Zane Caldwell  
442 W. Riverton Rd  
Blackfoot, ID 83221

Re: Snake River Basin Adjudication (SRBA)  
Claim 27-10296

Subject: OWNERSHIP CHANGE

**Response Date: JULY 28, 2004**

Dear Zane:

We have been advised you purchased 2 acres from David and Kathy Daniels from the above referenced water right. Before we can modify our records to reflect your ownership of the property and water right referenced above, we need Form 42-248/42-1409(6) completed and returned. I have enclosed this form for your use.

Please sign this form on back where it is indicated. Then return the complete form to my office by the above response date.

Please feel free to call me at 547-3993 if you have any questions.

Respectfully,

Cindy E. Bird  
Adjudication Bureau

CEB/  
Enclosures:  
Form 42-248/42-1409(6)

**Memo to File:** The following letter date November 6, 2002, was sent out to the claimants and no response was received back to Intrepid.

November 6, 2002

Dear Sir or Madam:

Intrepid Technology and Resources, Inc. (ITR) has been contracted by the Idaho Department of Water Resources (IDWR) to verify information in the State's records regarding the enclosed claim(s). This letter is being sent to the address of record for the enclosed claim(s).

In June or July of 2002, ITR employees visited the point(s) of diversion for the claim(s) in question. The purpose of this letter is to follow up on that visit, and ask for your input to verify the boundary of the area irrigated by each point of diversion. IDWR has supplied the enclosed maps and/or aerial photographs. The points of diversion (wellheads, dams, etc.) are indicated as circles. The irrigated areas are traced with bright yellow lines.

Please take the time to review the map, and correct any inaccuracies by marking changes on the map, and sending the map and claim file back to us in the enclosed postage-paid envelope.

If the claim is no longer in use, please note it on the claim file and return it to us in the enclosed envelope.

This applies only to the enclosed claim file. Water rights or claims not included with this package will be dealt with separately. Please DO NOT mark wells, diversions, or irrigated areas not specifically addressed in this package.

If you have any questions about the letter itself or how to respond, please call Doug Larsen or myself at 208-529-5337. We will be happy to discuss it with you.

Sincerely,

Shaun Dustin, PE  
Intrepid Technology & Resources, Inc.



# IDAHO DEPARTMENT OF WATER RESOURCES

SNAKE RIVER BASIN ADJUDICATION - BASIN 23-27



RIGHT ID    
POD ID   
Folder No.   
Claim Status   
IDTMEAST   
IDTMNORTH   
GPSID

## Diversion Description

HEADGATE TO CANAL, PUMP TO SPRINKLERS. Two large Vertical Turbine pumps lift water 7.5 feet. Pumps equipped with flow meter. Flow meter appears to average 100,000 gpm per flow meter, but ranges from 40,000 to 130,000 (can't get into pump house).

## Assumptions

Horse power.

Invoice #

2000-055-23-27-0

Phase-0 (No Attention)  
Phase-I (Ready to Go to Field)  
Phase-II (Site Visit - Data Missing)  
Phase-III (Complete w/issues)

Linked

photos\27-10296-001.JPG

photos\27-10296-003.JPG

photos\27-10296-005.JPG

Photos

photos\27-10296-002.JPG

photos\27-10296-004.JPG

photos\27-10296-006.JPG

GPS Accuracy (ft)

16 Feet

Date (M/D/Y)

07-24-02

Time

14:00

Flow Rate (CFS)

24.66

## Open Channel Flow

☐ Complete one box from both Area and Calculation sections

### Cross Sectional Area

#### ☐ Circular Channel

- ☐ Less than half full  
☐ Half full  
☐ More than half full  
☐ Full

Diameter

Depth

#### ☐ Rectangular Channel

Width

Depth

## Flow Calculation

☐ Continuity

Velocity

#### ☐ Orifice

(Use only for head over a pipe flowing full with free discharge)

Depth of Water above orifice centerline

#### ☐ Weir

(Use only for water flowing freely over weir)

Height of water above nappe

Width of weir

#### ☐ Manning (If used, include photo of representative channel section)

Channel Slope

Channel Description

|                           |      |
|---------------------------|------|
| Concrete lined            | .016 |
| Smooth earth              | .025 |
| Earth                     | .033 |
| Rough bed, weeds on sides | .04  |
| Smooth natural stream     | .033 |
| Rough natural stream      | .1   |

## Pumped System ☒

HP

Pressure Head (psi)

Elevation Head (ft)

Motor Mfg

Motor Serial #

Pump Type

Pump Mfg

Pump Serial#

## New Contact Information ☐

New Contact Comments

*This Form and the associated query are the exclusive intellectual property of Intrepid Technology Resources Inc., and may not be copied, modified, or distributed without the express written consent of Intrepid Technology and Resources, Inc.*



FOLDER NO. **A2710296**



**STATE OF IDAHO**  
**DEPARTMENT OF WATER RESOURCES**  
**NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP**

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.  
 Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

*This is not  
part of 27-10296  
it's concrete  
slough water  
CB*

| Water<br>Right No(s). | Adjudication<br>Claim No(s). | Split                               | Water<br>Right No(s). | Adjudication<br>Claim No(s). | Split |
|-----------------------|------------------------------|-------------------------------------|-----------------------|------------------------------|-------|
| <u>27-10296</u>       | <u>27-10296</u>              | <input checked="" type="checkbox"/> |                       |                              |       |
|                       |                              |                                     |                       |                              |       |
|                       |                              |                                     |                       |                              |       |
|                       |                              |                                     |                       |                              |       |
|                       |                              |                                     |                       |                              |       |

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts.
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):  
**PLAT OF PROPERTY** or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

**OR**

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

Orvin R. Lindsay and/or Kathy Lindsay  
442 W. Riverton Rd. Blackfoot ID 83221

4. New Owner/Claimant(s)

David A. Daniels and/or Kathy Daniels

Name Connector (Check one): ☐ and, ☐ or, ☒ and/or

New Mailing Address

436 W. Riverton Rd. P

City, State and ZIP Code

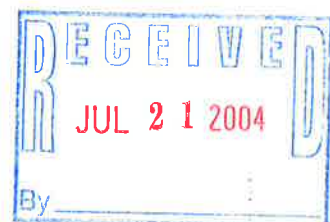
Blackfoot ID 83221

New Telephone Number

(208) 785-1284

5. Date you acquired the property

1952





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](http://www.idwr.state.id.us)

**DIRK KEMPTHORNE**  
Governor

**KARL J. DREHER**  
Director

July 22, 2004

David & Kathy Daniels  
436 W. Riverton Rd  
Blackfoot, ID 83221

REF: 27-10296

Subject: Ownership documents

Dear David and Kathy,

After our meeting yesterday I found these documents from some that had been submitted. It might help to find additional documents. It appears that Finetta Stevens received part of your land in 1909 from the United States. I don't know what happened to it after Finetta got it. It also doesn't describe the piece in the NENW. Some of the property you claimed in the south half of section 8 is government lots 2 & 4 in these documents. Some of the documents conveyed a portion of lot 4 in section 8, we will run our mapping program on the legal description to see if it is the same piece you own. I don't think it is because some of the later deeds convey it to Stan Hill. Hopefully, these will help in your search.

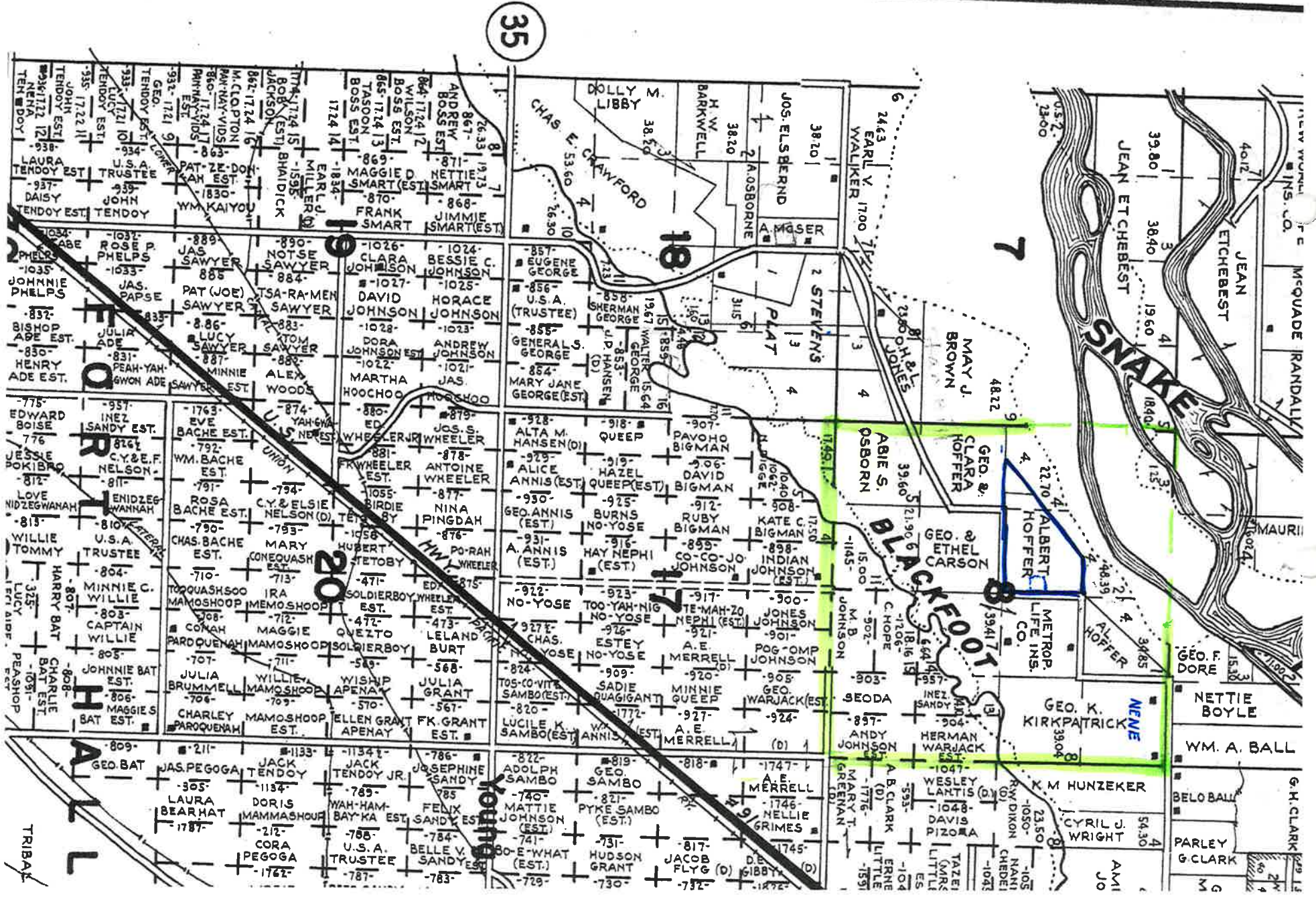
Respectfully,

Cindy E. Bird  
Adjudication Bureau

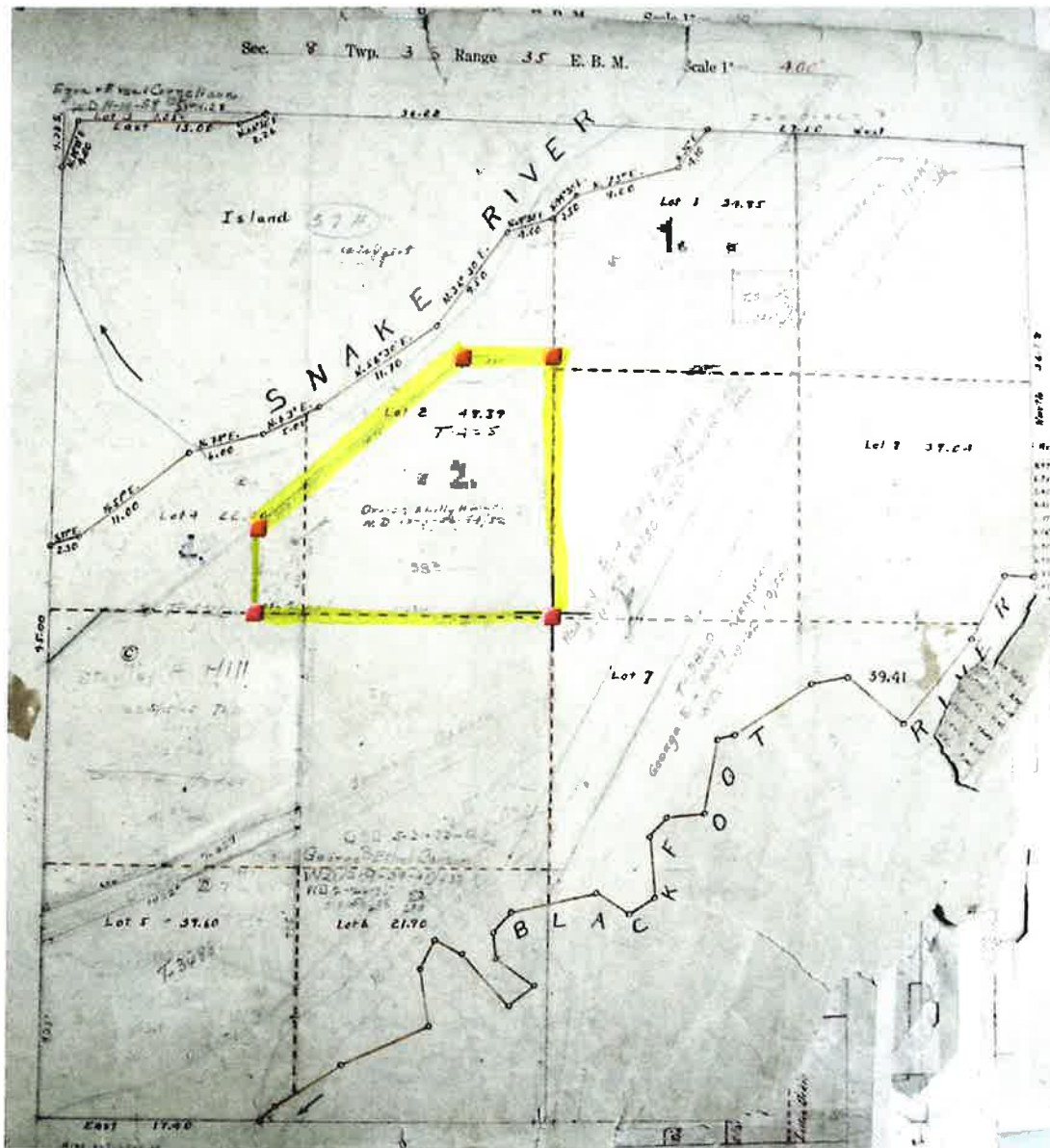
Enclosure: Old Warranty deeds

1ms & msw

1944 Netske Map



Supporting Information for Kathy and Orris Lindsey's Water Right No. 27-10296



Orris Lindsey Property identified as a portion of Lot 2 and Lot 4 of Section 8 R35E

■ Red blocks outline Lindsey property.

The above deeds reference the above described property.



IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT  
OF THE STATE OF IDAHO. IN AND FOR BINGHAM COUNTY.

\*\*\*

8-1-1891

Fred S. Stevens, et al. )  
Plaintiffs. )

-vs-

Eastern Idaho Water Co. et al. )  
Defendants. )

This cause having been heretofore tried  
by the Court without a jury and the Court having  
made its findings of fact and conclusions of law.

It is now ordered, adjudged and decreed  
that the following parties are entitled to divert  
from the Blackfoot River the amount of water here-  
in indicated and the right of each party dates  
from the time hereinafter stated and set opposite  
each name, to-wit: Among others is that of-

William Kirkpatrick May 1st, 1878 100 inches.

James Welch March 20th, 1886 400 inches.

It is further ordered, adjudged and de-  
creed, that all parties to this action shall have  
the right to use the waters of the several streams  
named in this decree for domestic purposes.

Done in open Court this August 1st, A.D. 1891.

Chas. Cabb.  
Judge Pro. Tem.

Recorded-in Judgment Book "1" at  
pages 107-116 of the records of -  
Bingham County, Idaho-

DO NOT FILM

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,  
IN AND FOR BINGHAM COUNTY.

8-1-1891

\*\*\*

Fred S. Stevens, etal  
Plaintiffs  
vs  
Eastern Idaho Water Co., etal  
Defendants.  
.....

This cause having been heretofore tried by the Court without a Jury and the Court having made its findings of fact and conclusions of Law.

It is now ordered, adjudged and decreed that the following parties are entitled to divert from the Blackfoot River the amount of water herein indicated and the right of each party dated from the time hereinafter stated and set opposite each name, to-wit:

Among other names is found that of Robert Millen- May 1st, 1885-150 inches.

It is Ordered, adjudged and decreed that the several quantities of water herein decreed shall be the quantities hereinbefore named measured under a four inch pressure and that the first appropriation in point of time is first in point of right and all appropriations of equal or of the same date are of equal rights. It is further adjudged and decreed that in case of insufficiency of water to supply all parties the entire volume is to be devoted to and used by those appropriators who are first in point of time.

It is further ordered, adjudged and decreed that all parties to this action shall have the right to use the water of the several streams named in this decree for domestic purposes.

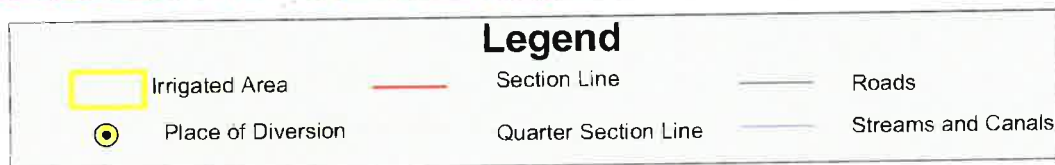
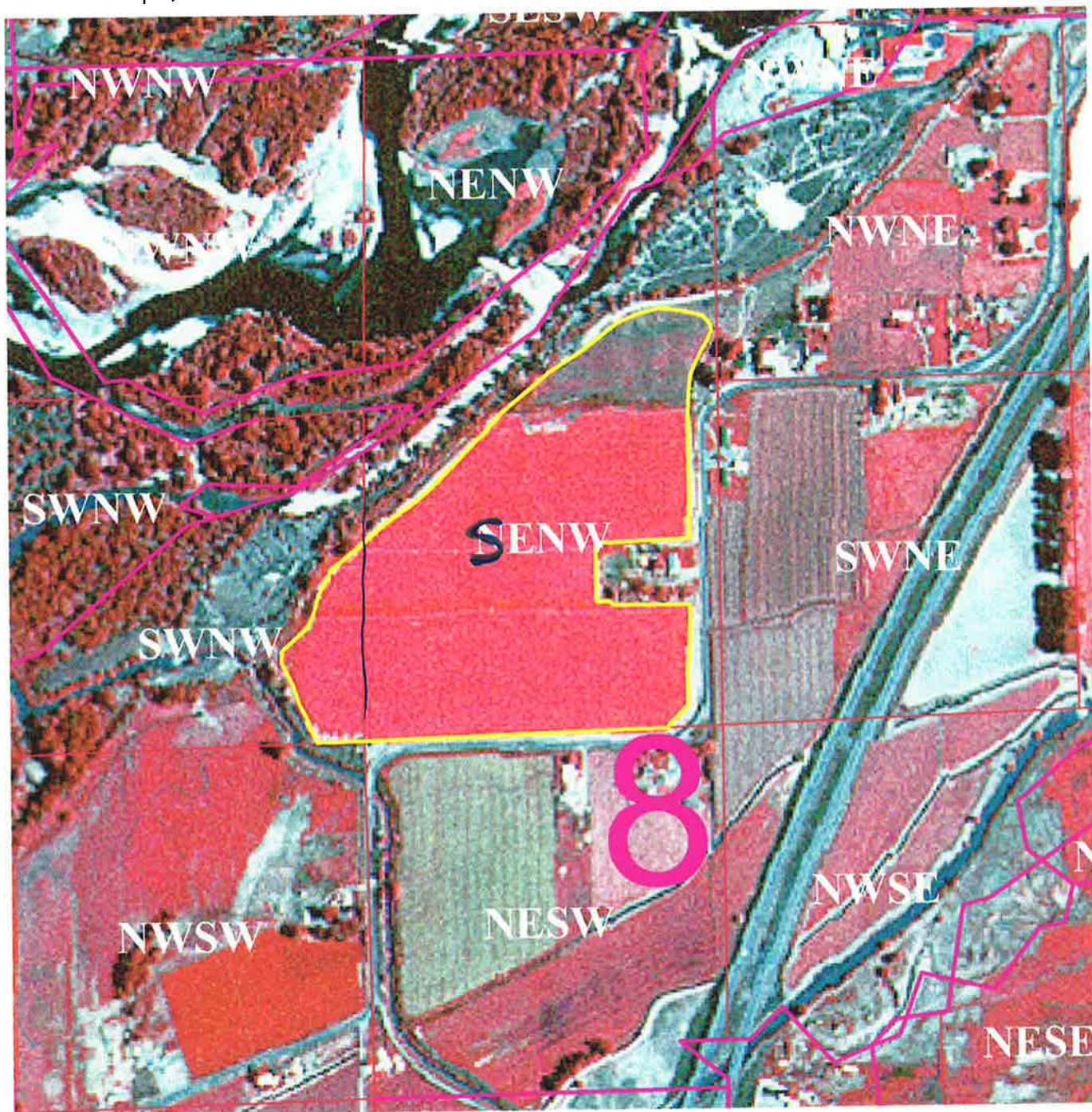
Done in open Court this August 1st, 1891.

Chas. Cobb,  
Judge Pro-tem

Recorded in Judgment Book No. 1  
Pages 107 to 116, of the records of  
Bingham County, Idaho-

Water Right Claim Number 27-10296  
Township , 3S35E

01/03/2001



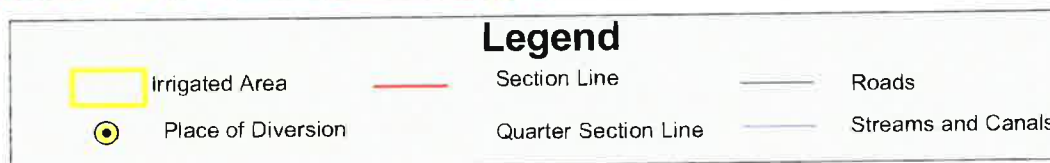
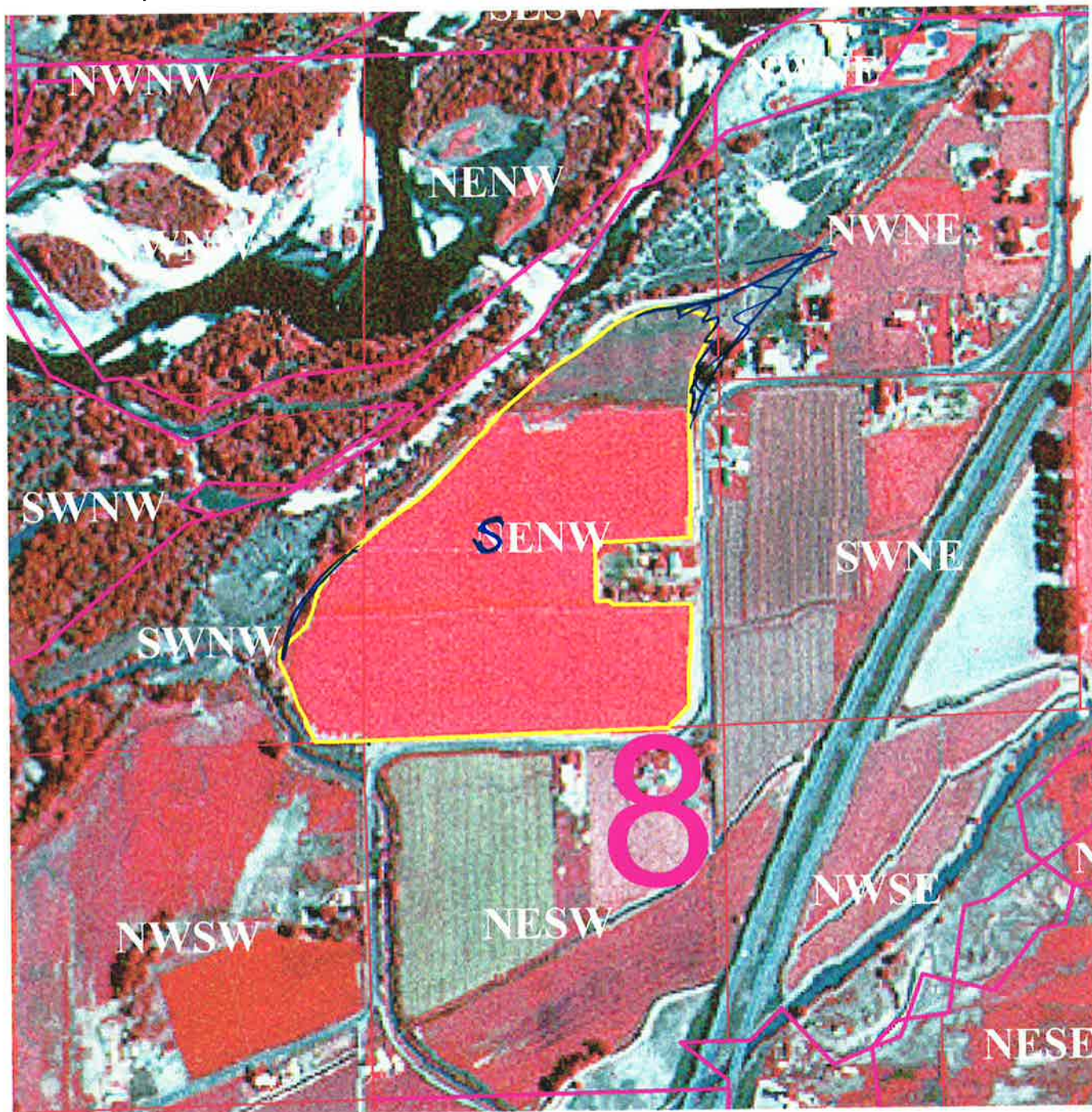
400 0 400 800 Feet



SPATIAL  
DYNAMICS

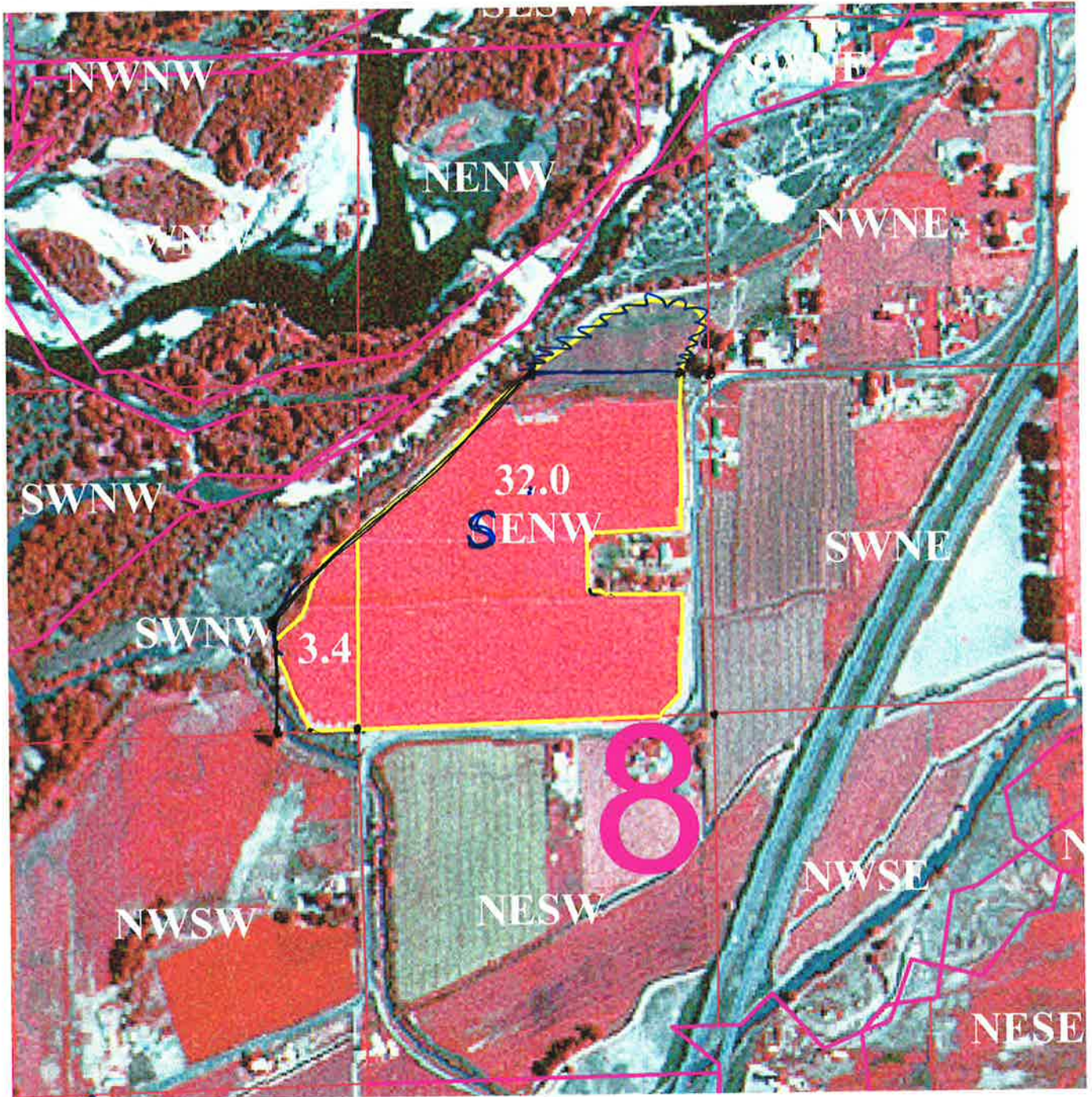
Water Right Claim Number 27-10296  
Township , 3S35E

01/03/2001



Water Right Claim Number 27-10296  
Township , 3S35E

01/03/2001



35.4 acres

| Legend                                                                              |                    |                                                                                     |                      |                                                                                      |                    |
|-------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------|--------------------|
|  | Irrigated Area     |  | Section Line         |  | Roads              |
|  | Place of Diversion |  | Quarter Section Line |  | Streams and Canals |



SPATIAL DYNAMICS

SCANNED

JUL 20 2001

Log for claim 27-10296

Spatial Dynamics LTD

1/3/01

| TR      | SEC | QQ   | Acres<br>Claimed | Acres<br>Found | COMMENT                   |
|---------|-----|------|------------------|----------------|---------------------------|
| 03s35e  | 8   | NENW | 40               | 32             | Includes SENW qq acreage. |
| 03s35e  | 8   | SWNW | 4                | 3.4            |                           |
| Totals: |     |      | 44               | 35.4           |                           |

Corbett Slough Ditch Company  
RECEIVED OF BLACKFOOT, IDAHO, January 19, 1989  
*Fifty and no/100*  
On account of ~~Assessment~~ *Water Adjudication fee.* DOLLARS \$ *50.00*  
*6767*  
By *Candy High* Secretary and Treasurer  
CORBETT SLOUGH DITCH COMPANY

MICROFILMED

NOV 12 1992

IN RE THE GENERAL ADJUDICATION  
OF RIGHTS TO THE USE OF WATER FROM  
THE SNAKE RIVER BASIN WATER SYSTEM

Corbett Slough Ditch Company

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

Please type or print clearly - Complete lines 1 through 8.

1. Name of Claimant(s) Kathy & Orris R Lindsay Phone (208) 785-1284  
Mailing Address 442 West Riverton Rd Blackfoot ID Zip 83221

Please send the following information to identify your ownership which now is, or could be irrigated under the above referenced canal system or lateral and ditch served thereby. It is suggested for this report purpose, you include land under fencelines, roadways and building locations in your acreage total below.

If your total acreage is or could be irrigated under this one canal, please submit all information outlined under 2 and 3 below:

2. A complete legal description of this property as contained in your deed or other legal instrument.
3. A copy of your Taxpayers 1988 Valuation Assessment Notice mailed to property owners earlier this year which contains your legal description or Tax Number (ie. T-1234)

\*\*\*\*\*

If any portion of your acreage is irrigated under another canal system, you must identify that acreage only, which is, or could be irrigated under the Corbett Slough Canal by sending all information outlined under 4 and 5 below:

4. An accurate legal description of your acreage, AND
5. A copy of an aerial map of your property, clearly outlining that portion only, which is, or could be irrigated under this canal system.
  - a. If you have an SCS Conservation Plan, included with this is an aerial map of your farm. A copy of this map with the fields outlined you irrigate under this canal will suffice.
  - b. If you do not have an aerial map, take a copy of your farm legal description, being sure to include the Township, Range and Sections, into the ASCS office. They will copy an aerial of your property for \$1.00, on which you can outline the acreage irrigated under this canal. This office is located at 765 W. Judicial.

| 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 |        |
| 35  | 35E | 8   |        |       |       |       |        |       | 4.5   | 35.5  |        |       |       |       |        |       |       |       | 40     |
|     |     |     |        |       |       |       |        |       |       |       |        |       |       |       |        |       |       |       | 40     |

NOTE: TX #425 THE CHART ABOVE IS FOR OFFICE USE ONLY. DO NOT ATTEMPT TO FILL IT OUT!

6. Total Number Acres Irrigated 40 7. Amount Paid \$ 10.00  
(minimum \$10.00 or \$1.00/acre + \$10.00)

I certify the information contained in the foregoing document with information attached thereto is true and correct.

8. Signature of Claimant(s) Orris R Lindsay Date 1-10-89

Use the back of this form for remarks or additional information.

See reverse side -

NOV 12 1992

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE  
STATE OF IDAHO, IN AND FOR BINGHAM COUNTY.

27-0 minute copy  
Transfers  
Noted

Fred S. Stevens, et al. )  
Plaintiffs, )  
-vs- )  
Eastern Idaho Water Co. et al., )  
Defendants. )

This cause having been heretofore tried  
by the Court, without a jury, and the Court having made its  
findings of fact and conclusions of law:

It is now ordered, Adjudged and Decreed, that the  
following parties are entitled to divert from the Blackfoot  
River, the amount of water herein indicated, and the right  
of each party dates from the time hereinafter stated and  
set opposite each name, to-wit:-

|      |                         |                       |                             |
|------|-------------------------|-----------------------|-----------------------------|
| 0012 | Fred S. Stevens         | July 6, A. D. 1869    | 138 Inches ✓                |
| 0013 | Henry Dunn              | July 1, A. D. 1870    | 300 Inches ✓                |
| 0014 | N. A. Just and )        | August 1, A. D. 1871  | 200 Inches ✓                |
| 0015 | Emma Just )             |                       |                             |
| 0016 | Leon Misslen            | July 1st, A. D. 1873  | 200 Inches - Trans # 92-221 |
| 0017 | John Misslen            | July 1st, A. D. 1874  | 180 Inches - Trans # 58     |
| 0018 | H. R. Lewis             | March 1st, A. D. 1875 | 100 Inches - 7-1            |
| 0019 | Presto Burrell          | March 1st, A. D. 1876 | 100 Inches ✓                |
| 0020 | William Kirkpatrick     | May 1st, A. D. 1878   | 100 Inches ✓                |
| 0021 | F. M. Shoemaker         | April 1st, A. D. 1879 | 190 Inches TRANS # 1962     |
| 0022 | Eastern Idaho Water Co. | March 25, A. D. 1880  | 1800 Inches                 |
| 0023 | P. B. Fox Jr. )         |                       |                             |
|      | William Howard )        |                       |                             |
|      | A. Whitten )            |                       |                             |

Younie P

RECORDED

MAY 15 1996

|      |      |                                                                                          |                                                      |               |                                                                                                                 |
|------|------|------------------------------------------------------------------------------------------|------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------|
| 212) | 0023 | Susan E. Whitten )<br>&<br>Calvin Mills )                                                | March 25, A. D. 1880                                 | ✓ 600 Inches  | Trans # 784, 787, 807                                                                                           |
| 227  | 0001 | Levi Warren                                                                              | April 1, A. D. 1882                                  | ✓ 50 Inches   |                                                                                                                 |
| 227  | 0025 | Emily Warren                                                                             | April 1, A. D. 1883                                  | ✓ 106 Inches  |                                                                                                                 |
| 227  | 0026 | Daniel Y. Miller                                                                         | April 1, A. D. 1883                                  | ✓ 100 Inches  |                                                                                                                 |
| 227  | 0027 | Fred S. Stevens                                                                          | October 1, A. D. 1884                                | ✓ 140 Inches  |                                                                                                                 |
| 227  | 0028 | N. A. Just )<br>&<br>Emma Just )                                                         | April 1st, A. D. 1885                                | ✓ 100 Inches  |                                                                                                                 |
| 227  | 0029 | Leon Misslen                                                                             | May 1st, A. D. 1885                                  | ✓ 300 Inches  | Trans # 58 - 44                                                                                                 |
| 227  | 0003 | Robert Millen                                                                            | May 1st, A. D. 1885                                  | ✓ 150 Inches  | Trans # 109                                                                                                     |
| 27   | 0004 | P. B. Fox Jr. )<br>William Howard )<br>A. Whitten )<br>Susan Whitten )<br>Calvin Mills ) | June 1st, A. D. 1885                                 | ✓ 1500 Inches | Trans # 237 - 246 - 328<br># 465 - 531 - 722 - 723 - 724<br># 852 - 853 - 854, 1561<br># 1162, 2445, 2578, 2993 |
| 227  | 0032 | W. W. Riter                                                                              | July 23rd, A. D. 1885                                | 560 Inches    | 7-1 No water after 7-                                                                                           |
| 227  | 0033 | Thomas G. Weber                                                                          | July 23, A. D. 1885                                  | 480 Inches    | 7-1 No water after 7-1                                                                                          |
| 227  | 0002 | James Drew                                                                               | Oct. 1st, 1885 A. D.                                 | 6 Inches      | ✓                                                                                                               |
| 227  | 0035 | Eastern Idaho Water Co.                                                                  | October 1st, A. D. 1885                              | 1000 Inches   | ✓                                                                                                               |
| 227  | 0036 | H. R. Lewis )<br>&<br>Sarah Lewis )                                                      | March 1, A. D. 1886                                  | 160 Inches    | 7-1 (No water after 7-1)                                                                                        |
| 227  | 0037 | James Welch                                                                              | March 20th, A. D. 1886                               | 400 Inches    | ✓                                                                                                               |
| 227  | 0038 | William H. Danilson                                                                      | April 5th A. D. 1886                                 | 352 Inches    | Little Butte Irr. Syst                                                                                          |
| 227  | 0039 | David S. Morgan                                                                          | April 5th, A. D. 1886                                | 132 Inches    | "                                                                                                               |
| 227  | 0040 | William Morgan                                                                           | April 5th, A. D. 1886                                | 100 Inches    | "                                                                                                               |
| 227  | 0041 | William A. Downing                                                                       | April 5th, A. D. 1886                                | 120 Inches    | No water after 7-                                                                                               |
| 227  | 0042 | F. Little                                                                                | October 4th A. D. 1886 7-1                           | 240 Inches    | 7-1 27-42 Bear Lake Grayer                                                                                      |
| 227  | 0043 | Charles S. Burton                                                                        | October 4th A. D. 1886                               | 240 Inches    | 7-1 No H <sub>2</sub> O after 7-1 Roland                                                                        |
| 27   | 0044 | John Sharp Sr.                                                                           | November 1, A. D. 1886 No H <sub>2</sub> O after 7-1 | 320 Inches    | 7-1 27-11016 128" L&L                                                                                           |
| 227  | 0045 | F. W. Jennings                                                                           | November 1, A. D. 1886 No H <sub>2</sub> O after 7-1 | 400 Inches    | 7-1                                                                                                             |
| 227  | 0046 | Donald Tolmie                                                                            | April 1st, A. D. 1887 No H <sub>2</sub> O after 7-1  | 100 Inches    | 7-1                                                                                                             |

MAY 15 1996

(2)

RECEIVED  
JUL 20 2001  
JUN 25 1993

Department of Water Resources  
Foster District Office

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: A27-10296  
Date Received: 4/20/1989  
Receipt No: M003230  
Received By:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

AMENDED

1. Name: ORRIS R. LINDSEY 208-785-1284  
Address: 442 WEST RIVERTON ROAD  
BLACKFOOT ID 83221  
AND/OR  
Name: KATHY LINDSEY 208-785-1284  
Address: 442 WEST RIVERTON ROAD  
BLACKFOOT ID 83221

2. Date of Priority: MAY 1, 1885

3. Source: BLACKFOOT RIVER Trib. to: SNAKE RIVER

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County  |
|----------|-------|---------|--------|--------|-----|-----|---------|
| 03S      | 35E   | 9       | NW     | SE     | NE  |     | BINGHAM |

5. Description of diverting works:  
HEADGATE TO CANAL, PUMP TO SPRINKLERS

6. Water is used for the following purposes:

| Purpose    | From  | To    | C.F.S. | (or) | A.F.A. |
|------------|-------|-------|--------|------|--------|
| IRRIGATION | 04/01 | 11/01 | 0.870  |      |        |

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

| Township | Range | Section | 1/4 of | 1/4 | Lot | Use | Acres |
|----------|-------|---------|--------|-----|-----|-----|-------|
| 03S      | 35E   | 8       | NE     | NW  |     | IRR | 5.0   |

MICROFILMED

APR 12 1994

10. Place of Use: Continued

| Township      | Range | Section | 1/4 of 1/4 | Lot | Use | Acres |
|---------------|-------|---------|------------|-----|-----|-------|
| 03S           | 35E   | 8       | SW         | NW  | IRR | 4.5   |
|               |       |         | SE         | NW  | IRR | 35.5  |
| Section Acres |       |         |            |     |     | 45.0  |
| Total Acres   |       |         |            |     |     | 45.0  |

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:  
2 SHARES OF CORBET SLOUGH WATER.

14. Remarks:  
THIS CLAIM BASED ON DECREED RIGHT 27-00003B, THIS CLAIM IS FOR  
43 1/3 INCHES, DELIVERED BY THE MINERS DITCH.

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): Oris R Lindsay Date: 6-17-93  
Kathy Lindsay Date: 6-17-93

MICROFILMED

APR 12 1994

State of Idaho )  
County of Bingham ) SS.

Subscribed and sworn (or affirmed) before me this 17th day  
of June 1993

Rae Nell  
Notary Public

Seal

Residing at Blackfoot Idaho

My Commission Expires 4-29-98

MICROFILMED

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: A27-10296

Date Received: 4/20/1989

Receipt No: M003280

Received By: AB

NOTICE OF CLAIM TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

1. Name: ORRIS R. LINDSEY 208-785-1284  
Address: 442 WEST RIVERTON ROAD  
BLACKFOOT, ID 83221

AND/OR

Name: KATHY LINDSEY 208-785-1284  
Address: 442 WEST RIVERTON ROAD  
BLACKFOOT, ID 83221

2. Date of Priority: MAY 01, 1885

3. Source: BLACKFOOT RIVER Trib. to: SNAKE RIVER

4. Point of Diversion:

| Township | Range | Section | 1/4 of | 1/4 of | 1/4 | Lot | County  |
|----------|-------|---------|--------|--------|-----|-----|---------|
| 03S      | 35E   | 9       | NW     | SE     | NE  |     | BINGHAM |

5. Description of diverting works:  
HEADGATE TO CANAL, PUMP TO SPRINKLERS

6. Water is used for the following purposes:

| Purpose    | From  | To    | C.F.S. | (or) | A.F.A. |
|------------|-------|-------|--------|------|--------|
| IRRIGATION | 04/01 | 11/01 | 0.870  |      |        |

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

A27-10296

Page 1

Date: 04/20/89

MICROFILMED

NOV 12 1992



10. Place of Use:

| Township | Range | Section | 1/4 of | 1/4 | Lot | Use           | Acres |
|----------|-------|---------|--------|-----|-----|---------------|-------|
| 03S      | 34E   | 8       | NE     | NW  |     | IRR           | 5.0   |
|          |       |         | SW     | NW  |     | IRR           | 4.5   |
|          |       |         | SE     | NW  |     | IRR           | 35.5  |
|          |       |         |        |     |     | Section Acres | 45.0  |
|          |       |         |        |     |     | Total Acres   | 45.0  |

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:  
2 SHARES OF CORBET SLOUGH WATER.

14. Remarks:  
THIS CLAIM BASED ON DECREEED RIGHT 27-00003B, THIS CLAIM IS FOR  
43 1/3 INCHES, DELIVERED BY THE MINERS DITCH.

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 No wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 4

**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): Oris R. Lindsay Date: 4-20-89  
\_\_\_\_\_  
Date: \_\_\_\_\_

State of Idaho )  
County of Bingham ) SS.

Subscribed and sworn (or affirmed) before me this 20<sup>th</sup> day  
of April 19 89

Anna Baumbach  
Notary Public

Seal

Residing at Boise Idaho  
My Commission Expires 12/7 1994

Board on  
June 27-00003B  
43 1/3 inches

POU: NE, NW: 5.0  
SE, NW: 35.5  
SW, NW: 4.5

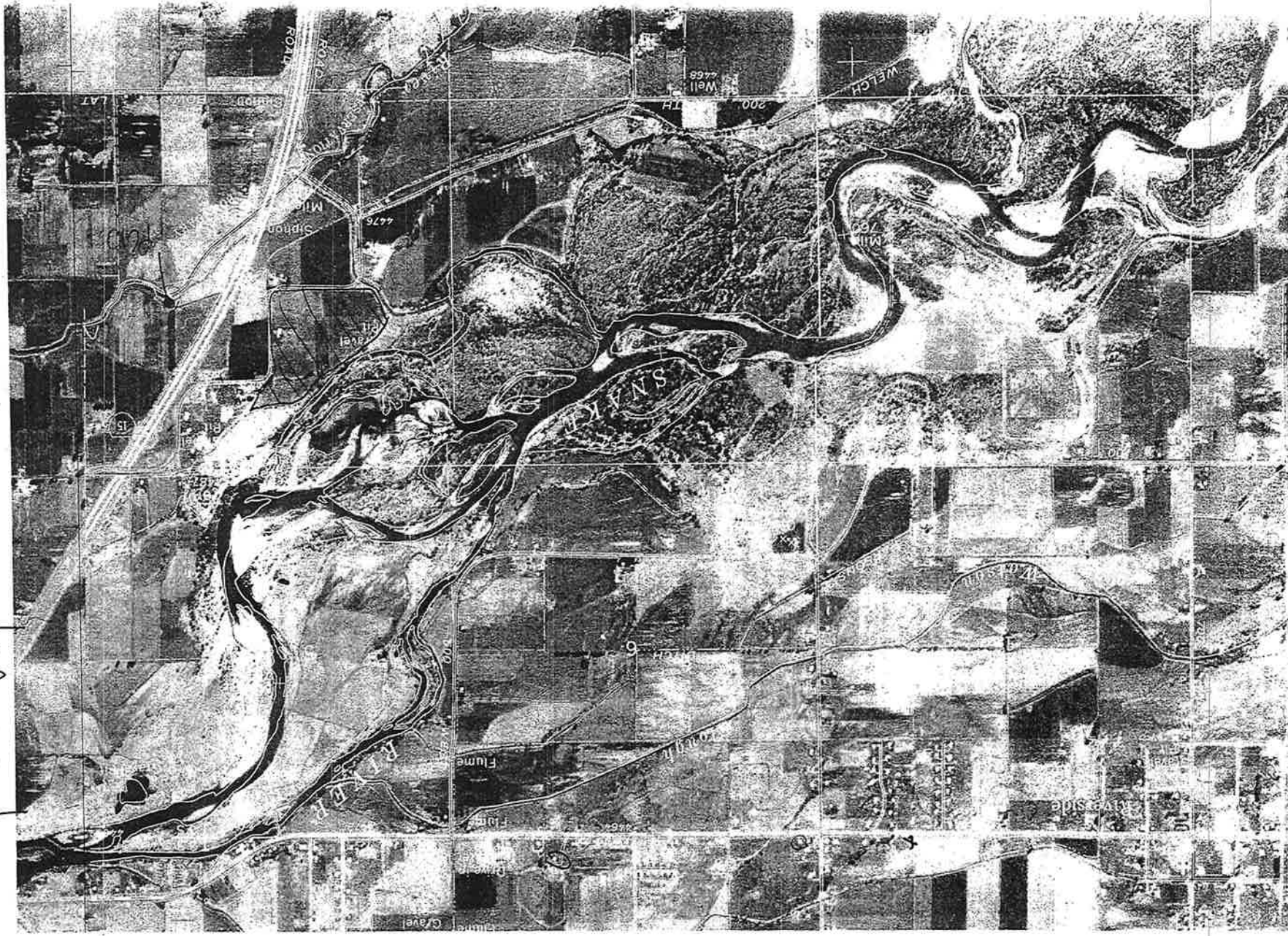
450000

#A27-102940

T35  
R35E  
Sec 8 T3

MICROFILMED  
NOV 12 1992

35  
35E



POD: NW, SE, NE  
Sec 9

T35, R35E

ENTRANCE

NOV 12 1992

540 000  
FEET

