

12/10/2002

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

RIGHT NUMBER: 29-7154
NAME AND ADDRESS: CITY OF INKOM
PO BOX 386
INKOM ID 83245

SOURCE: GROUND WATER
QUANTITY: 2.090 CFS
PRIORITY DATE: 08/27/1973
POINT OF DIVERSION:

TRIBUTARY:

T07S R36E S21 NENWSW Within BANNOCK County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
MUNICIPAL

PERIOD OF USE
01/01 12/31

QUANTITY
2.090 CFS

PLACE OF USE:

Place of use is within the service area of the City of Inkom municipal water supply system as provided for under Idaho Law.

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

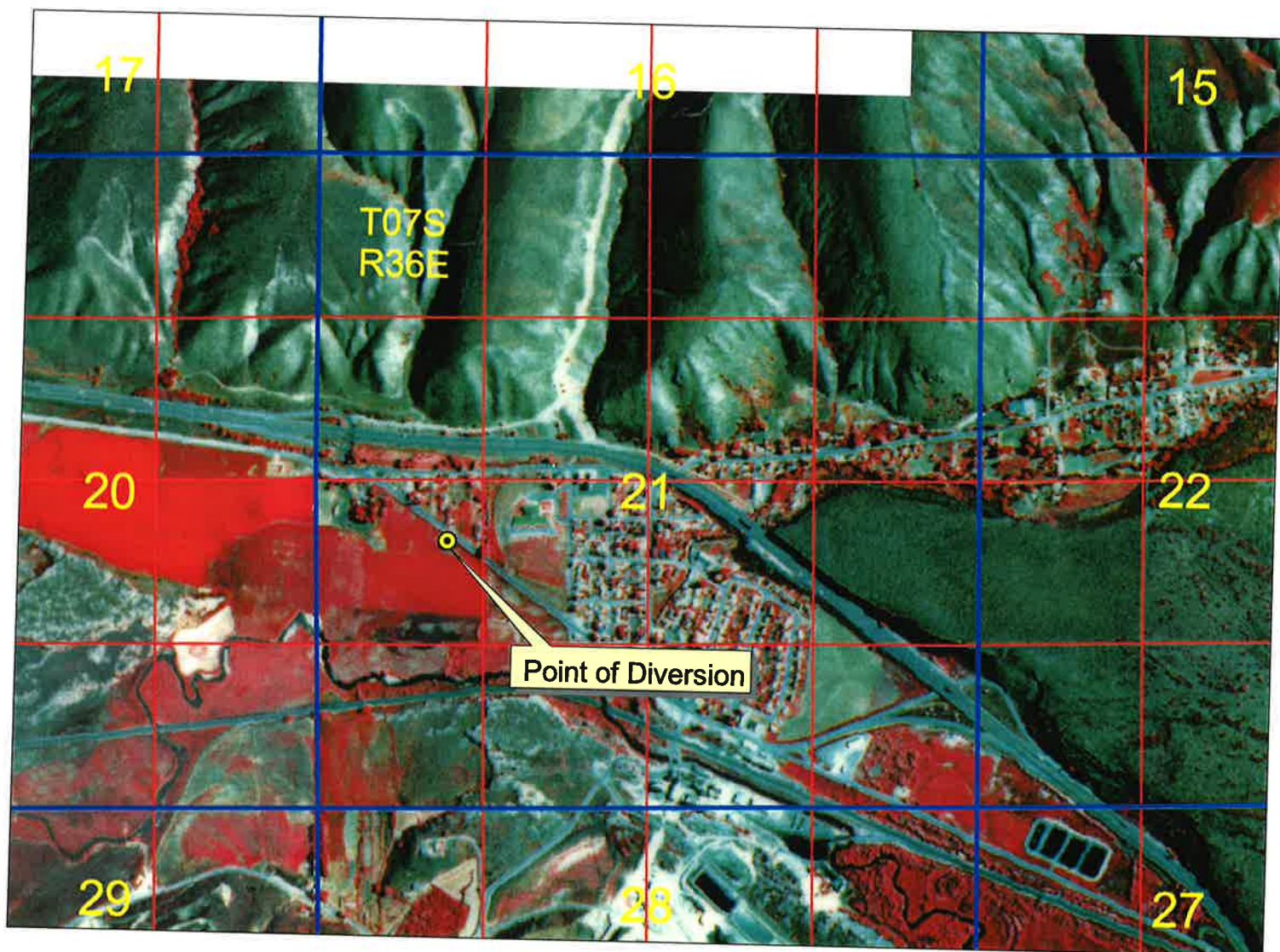
This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL: License

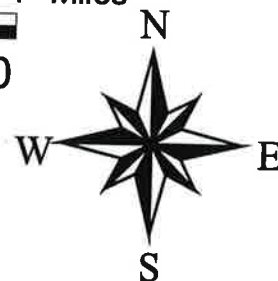


State of Idaho
Department of Water Resources
Eastern Region

Water Right: 29-7154



1:16000



- Point(s) of Diversion
- ▨ Place of Use
- ▭ Section Lines
- ▭ Quarter Quarter Lines

PROFILED

SCANNED

APR 19 2006

GIS Place of Use Illustration
1987/1988 NAPP Photography
Prepared by: P. Meyer
Date: December 2002

02/18/2003

Craig

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: April 21, 2003

Water right number: 29-7154

CITY OF INKOM

PO BOX 386

INKOM ID 83245

Telephone Number: (208) 775-3372

RECEIVED

APR 02 2003

WATER RESOURCES
WESTERN REGION

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:

RECEIVED
APR 07 2003
Department of Water Resources
Eastern Region

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

DATE: 3-10-03 SIGNATURE: *Sheldon Ward*

Please print your name: Sheldon Ward

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

RECEIVED

MAR 25 2003

Department of Water Resources
Eastern Region

PROFILED

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APR 19 2006

7-23-02 : Claimed as Licensed

7-30-02 : Licensing FE seems to indicate that well
FE is outside of pump house. However, FE doesn't
confirm this. No signs of well in surrounding
area. must be inside structure

12-2-02 : GPS ID = "Inkom 2"

: Recommend as Licensed

: pon within city limits of Inkom

SCANNED

APR 19 2006

PROFILED

29-07154

POD

FIELD EXAM: 7-30-02



Looking SW at Point of Diversion pump house. Licensing field exam seems to indicate that well is outside of pump house. However, FE doesn't confirm this. No signs of well in surrounding area. Must be inside structure (csaxton 8/7/02).

PROFILED

SCANNED

APR 19 2006

WATER RIGHT LICENSE

MICROFILMED

TOTAL ACREAGE

Rge 30E

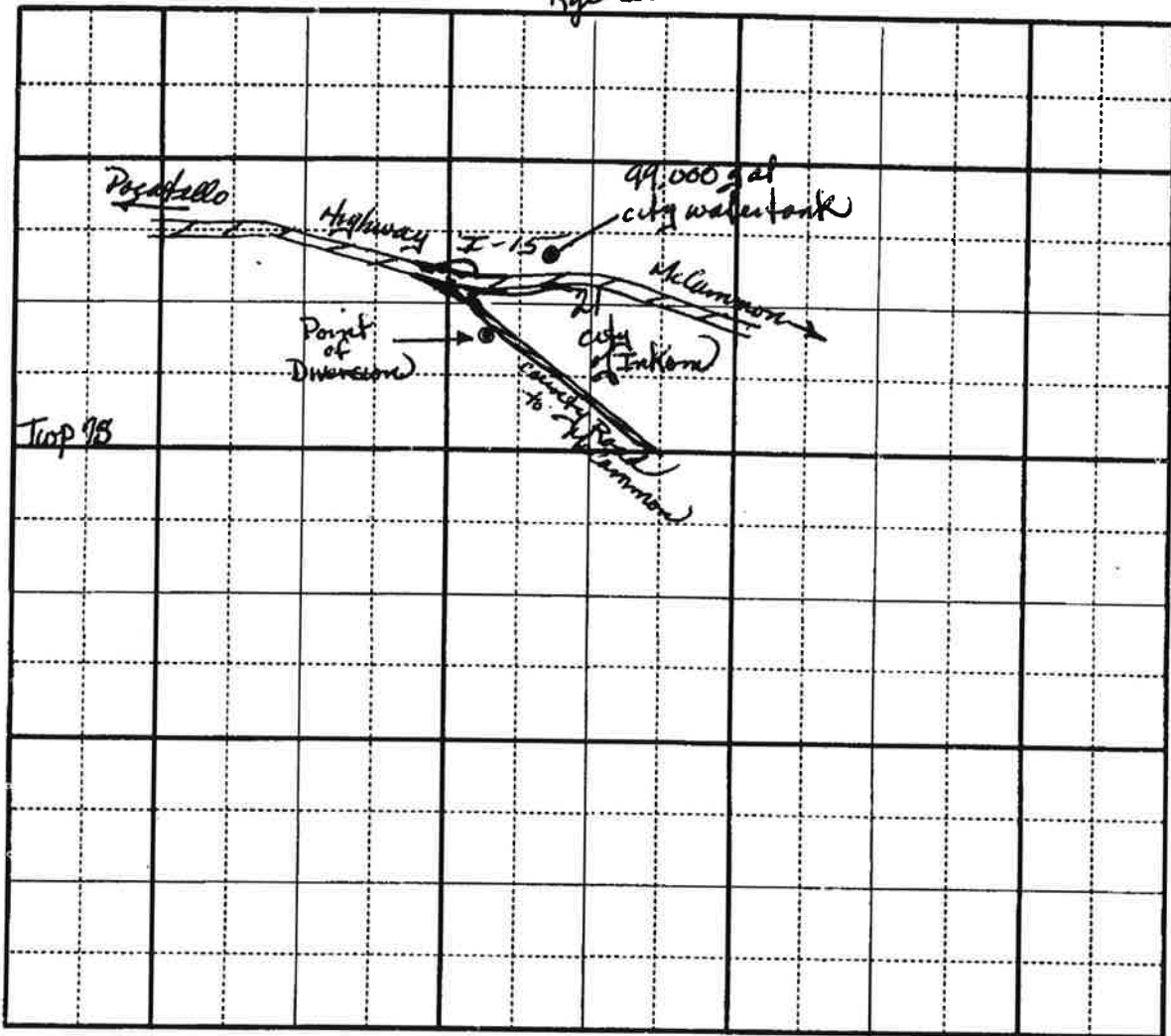
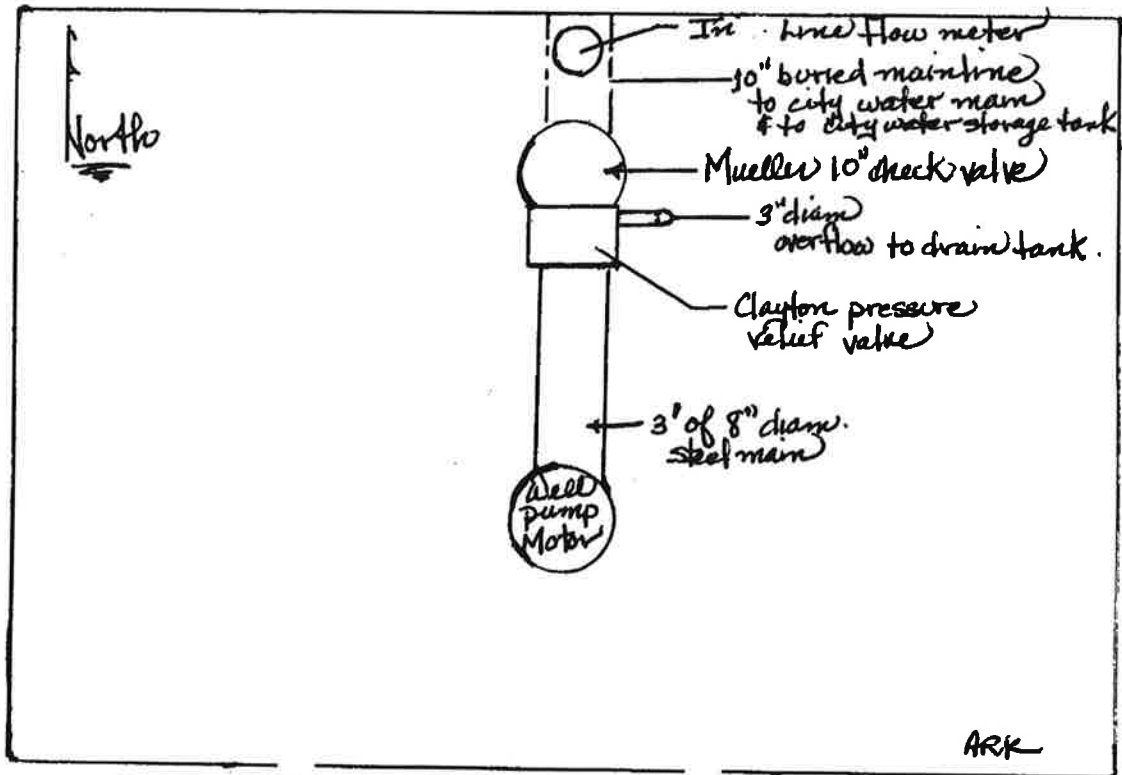


Diagram of System



DATE OF EXAM 30th day of May, 1979

ACREAGE

Found

Recommended

Irrigation Requirement n/a Ac Ft/Ac

USE

Irrigation Q = c.f.s.

V =

AF/Ann. from

to

Domestic Q = c.f.s.

V =

AF/Ann. from

to

Livestock Q = c.f.s.

V =

AF/Ann. from

to

Municipal (well #2) Q = 2.09 c.f.s.

from Jan 1 to Dec 31

Is water co-mingled? yes no X

Name source: n/a

twp.

N/S, Rge

E/W, B.M., Sec.

Sub.

1/4

1/4

County

Exchange? yes no X

Name source exchanged with: n/a

twp.

N/S, Rge

E/W, B.M., Sec.

Sub.

1/4

1/4

County

Point of injection: n/a

twp.

N/S, Rge

E/W, B.M., Sec.

Sub.

1/4

1/4

County

Point of exchange: n/a

twp.

N/S, Rge

E/W, B.M., Sec.

Sub.

1/4

1/4

County

Total Q measured

2.09 cfs

Method of measurement

Inline flow meter

Total Q recommended

2.09 cfs

Meter No.

107541

Type

spanning
Hershey

Condition

std.

Total V recommended

n/a

Recommended Amendments:

P.D.

Place of Use

Other

None

MEASUREMENT CALCULATION:

measured 1,000 gallons in 64 sec; $\frac{1,000 \text{ gal}}{64 \text{ sec}} = \frac{x}{60 \text{ sec}}$, $64x = 60,000$

$x = 937.5 \text{ gpm} \div 48.8 \text{ gpm/cfs} = 2.09 \text{ cfs}$

Volume - not calculated on municipal water right exams
as per administrative memo.

SYSTEM DESCRIPTION:

Groundwater is diverted by a 75 H.P. Fairbanks-Morse vertical pump motor
3pk s/n - F262302, m/n - H61088-13, and by a Peerless
vertical turbine pump, s/n - 233984. The groundwater is
diverted into the city water main and supplements well #1
which is located in front of the Inkom school house. The system
can also be used to pump water uphill into the city's

REMARKS:

99,000 gal storage tank, located north of the city on
the side of a mountain.

System shown, operated, and described by Doyle Gabrielson
city maintenance man.

Examiner's Signature

Anthony R. Kozlowski

Date

Dec 3, 1979

Checked by

John D. Carlson

Date

12/13/79

Approved by

John

Date

2/10/81

29-2361 - Abandoned
29-2368 - different well



State of Idaho
DEPARTMENT OF WATER RESOURCES
STATE OFFICE, 373 W. Franklin Street, Boise, Idaho

JOHN V. EVANS
Governor

C. STEPHEN ALLRED
Director

Mailing address:
Statehouse
Boise, Idaho 83720
(208) 384-2215

September 20, 1978

City of Inkon
P. O. Box 166
Inkom, ID 83245

Dear Sirs:

Re: Permit No. 29-7154

We acknowledge receipt of the affidavit submitted as proof of beneficial use for the above referenced permit.

Before a license can be issued, a field examination must be made by a representative of this Department. We cannot tell just when this examination will be made, but our examiner will try to contact you at the time he makes the examination so that you may show him the system.

If you have any questions regarding the field examination, please contact our regional office in Idaho Falls.

Sincerely,

RITA FLECK
Water Rights

PROFILMED

JUN 13 2001

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

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

CIVIL CASE NUMBER: 39576

Ident. Number: A29-07154

Date Received: 5/17/1990

Receipt No: E013240

Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CITY OF INKOM
Address: P.O. BOX 386
INKOM, ID

208-775-3372

83245

2. Date of Priority: AUG 27, 1973

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	36E	21	NW	SW			BANNOCK

5. Description of diverting works:
WELL, PUMP & PIPELINE.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
MUNICIPAL	01/01	12/31	2.090		

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

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:
D/ 300 HOMES

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	36E	21				MUNI	
		22				MUNI	

11. Place of use in counties: BANNOCK

A29-07154

Page 1

Date: 05/17/90

MICROFILMED

NOV 13 1992



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

13. Other Water Rights Used:
22-7597 & 29-2368.

14. Remarks:
P/U WITHIN CITY LIMITS OF INKOM.

15. Basis of Claim: LICENSE

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

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

CIVIL CASE NUMBER: 39576

Ident. Number 229-07154Date Received 4-16-90Receipt Number EO 13240/90

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

APR 16 1990

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) City of Inkom Phone (208) 775-3372Mailing Address P.O. Box 386 Inkom, Idaho Zip 832452. Date of Priority (Only one (1) per claim) August 27, 19733. Source of water supply (a) Groundwater
which is tributary to (b) _____4. a. Location of existing point of diversion is: Township 7S Range 36E Section 21,
SE 1/4 of NW 1/4 of SW 1/4, Govt. Lot, _____ B.M., County of _____

Additional points of diversion if any: _____

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

Township 7S Range 36E Section 21, _____ 1/4 of _____ 1/4 of _____ 1/4,

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

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of
_____ 1/4, Govt. Lot _____ B.M., County of _____5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well.Deep well with turbine pump. Distribution system for
municipality

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NOV 13 1992

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Municipal purposes from Jan 1 to Dec 31 amount 2.09 or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 2.09 (cfs) and/or (b) _____ (acre feet)

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

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) 300 households Domestic for Municipality

10. Description of place of use:

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

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

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>7S</u>	<u>36E</u>	<u>21</u>																	
<u>7S</u>	<u>36E</u>	<u>22</u>																	

Total number of acres irrigated _____

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

12. Do you own the property listed above as place of use? Yes xx No _____

If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

A29-07597

or None ()

14. Remarks:

PLACE OF USE is within City Limits of Inkom

Last Name City of Inkom Ident No. _____

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License xx Permit _____
Decree _____
If applicable provide IDWR Water Right Number 29-7154
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read, and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 1

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date _____
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am City Clerk-Treasurer
Title
of City of Inkom , that I have signed the foregoing
Organization
document in the space below as City Clerk-Treasurer of City of Inkom
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Sherry Helmandollar

Title and Organization City of Inkom City Clerk Date 3/22/90
Treasurer

State of Idaho/or Idaho)
County of Bannock) SS.

Subscribed and sworn (or affirmed) before me this 22nd day of March 19 90

SEAL

Notary Public Anna Baunhoff

Residing at _____

My Commission Expires _____

Please Print Name

Anna Baunhoff, Notary Public
Residing at Boise, Idaho
My Commission Expires December 7, 1994

17. Notice of Appearance:

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

Signature _____

Address _____

Date _____

Last Name City of Inkom Ident. Number _____

MICROFILMED

NOV 13 1992

Copies White-State, Yellow-Claimant



A2907154

MICROFILMED
NOV 13 1992

⊗
WELL #2
A29-07154

MICROFILMED
NOV 13 1992

