

CLAIMANT'S NAME: Delete Split Rights Dual ClaimsDATE: 8/15/89EMPLOYEE: Schuld

RE:

This claim is split into claims A35-07164A and A35-7164B as two claimants have submitted claims reflecting the same Places of Use and Basis of Claim i.e. NW 1/4 NW 1/4 Sec 16, T5S, R31E and Lic # 35-07164. T.O. suggested 35-07164 may be the basis for A35-07164.

One of the claimants may wish to ~~notarize~~ withdraw his claim while the other may wish to submit proof of ownership.

Bruce A Schuld.

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4/11/1989

SRBA CLAIMS RECEIVING CHECKLIST #2

CLAIMANT'S NAME

CLAIM NO.

ENT. NO. A35-07164

DATE RECEIVED

6-1-89

CK #

AMOUNT \$

YES

NO

Required Info?

1. Is the name and address complete with zip code? ☒
2. Is a priority date entered? ☒
Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required.
3. (a) Is a source entered? ☒
(b) Is a tributary to entered? (if required) ☒ N/A
4. Is the legal description of the p.d. sufficient? ☒
5. Is there a description of the diverting works? ☒
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. ☒
Is the period of use included? ☒
Is a quantity claimed for each use? ☒
7. Is a total quantity claimed entered? ☒
8. If required is a consumptive use entered? ☒ N/A
Is the consumptive use correct? ☒ N/A
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. ☒ N/A
10. Is (are) the place(s) of use and purpose(s) indicated? ☒
11. Is (are) the county(ies) entered? ☒
12. Is the ownership of p.u. checked? ☒
13. Are other water rights listed or "none" indicated? ☒
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) ☒ N/A
15. Is the basis of the claim indicated? ☒
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☒ N/A
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒
18. Has the claim been signed, sealed, and dated by a notary? ☒
19. Was this claim filed on time, or was an extension granted? ☒
20. Is the fee enclosed correct? ☒ Exempt
21. If this claim is based on an existing water right, has the identification number been entered? ☒ N/A
22. Should this claim be data entered? ☒

Claim checked by:

Date:

7-12-89

Claim must be returned to claimant:

(Yes) ☒ (No)

Claimant must be notified of modifications:

(Yes) ☒ (No)

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date:

Date:

Checked by:

Date:

Comments:

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Cavaness & Boomer

BEN CAVANESS
HENRY R. (Hank) BOOMER

ATTORNEYS-AT-LAW
P.O. Box 70 — 376 Roosevelt
American Falls, Idaho 83211

Telephone
(208) 226-2562

June 1, 1989

Harold Jones
Appropriation Examiner
Idaho Dept. of Water Resources
150 Shoup
Idaho Falls, ID 83401

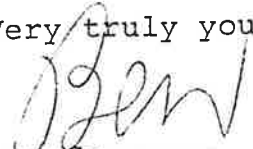
Re: John R. Duffin Claims

Dear Skip:

Enclosed are four original Notice of Claim to Water Rights for Mr. John R. Duffin, along with the four checks for the required filing fees.

If you have any problems, please advise.

Very truly yours,


Ben Cavaness

BC:mh

Encl.

cc: John R. Duffin

PROFILE

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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: A35-07164
Date Received: 6/01/1989
Receipt No: E008789
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JOHN R. DUFFIN 208-397-4076
Address: 1436 S. 2750 W.
ABERDEEN, ID 83210

2. Date of Priority: FEB 01, 1971

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
05S	31E	16		NW	NW		BINGHAM

5. Description of diverting works:
WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/04	11/01	2.350		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
05S	31E	16	NE	NW		IRR	36.0
			NW	NW		IRR	38.0
			SW	NW		IRR	39.0

A35-07164

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Date: 07/21/89

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10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
05S	31E	16	SE NW		IRR	37.0

Section Acres 150.0

Total Acres 150.0

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:
NONE

14. Remarks:

15. Basis of Claim: LICENSE

A35-07164

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Date: 07/21/89

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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 _____

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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 A35-07164
Date Received 6/1/89 postmarked S.P.
Receipt Number E008789

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

JUN - 2 1989

Department of Water Resources
Eastern District Office

Please type or print clearly

1. Name of Claimant (s) JOHN R. DUFFIN Phone (208) 397-4076
Mailing Address 1436 S 2750 W Aberdeen, Idaho Zip 83210

2. Date of Priority (Only one (1) per claim) February 1, 1971

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

4. a. Location of existing point of diversion is: Township 5 S Range 31 E Section 16
1/4 of NW 1/4 of NW 1/4, Govt. Lot, E B.M., County of Bingham

Additional points of diversion if any: _____

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

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

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

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

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

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well. 75 hp elec motor, 16" well

100 depth, static water level 50' w/wheel lines, deep well,
turbine pump & mainline 8" & 6"

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6. *Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For irrigation purposes from Apr 1 to Nov 1 amount 2.35cfs or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

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

8. Total consumptive use claimed is 2.35 cfs acre feet per annum.

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

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	
5 S	31E	16					36	38	39	37									150

Total number of acres irrigated 150

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

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above. _____ or None ()

14. Remarks:

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Last Name DUFFIN

Ident No. _____

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License X Permit _____
Decree _____

If applicable provide IDWR Water Right Number 35-7164

Court _____ Case Number _____ Decree Date _____

Plaintiff vs Defendant _____

16. Signature (s)

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

Number of attachments _____

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

Signature of Claimant (s) John R. Duffin

Date 5-31-89

Date _____

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

Title _____

of _____, that I have signed the foregoing

Organization

document in the space below as _____ of _____

Title

Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____

Date _____

State of Idaho/or IDAHO)

County of Power)

SS.

Subscribed and sworn (or affirmed) before me this 31st day of May 19 89

SEAL

Notary Public Martine Henry

Residing at American Falls, ID

My Commission Expires 5/17/93

Please Print Name

17. Notice of Appearance:

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

Signature _____

Address _____

Date _____

Last Name DUFFIN

Ident. Number _____

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Copies White-State, Yellow-Claimant

Scale: 2 inches equals 1 mile

A 20x20 grid map of Township 5 South, Range 31 EBM. The grid is divided into four 10x10 quadrants. A red rectangle highlights a 4x4 area in the center-right quadrant. The text 'x' is in the top-left cell of the red area, 'Well' is in the top-right cell, and '16' is in the middle-right cell. The text 'Township 5 South' and 'Range 31 EBM' is written in the bottom-left quadrant.

DUFFIN

Ident No.

SCANNED
SEP 01 2005

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DEC 10 1992

Copies: White-State, Yellow-Claimant