

AJ5809NP
No. R35-13199

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 11/10/98
PAGE: 6

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	BOONDOX FARMS LTD PARTNERSHIP 2596 QUIGLEY AMERICAN FALLS ID 83211 (208) 226-2029	11/01/1983	DOMESTIC	01-01 12-31	0.08 CFS	
TOTAL DIVERSION:					0.08 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T07S R29E S09 SESE POWER County

Place of use Legal Description for: DOMESTIC

NE				NW				SW				SE						
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:
07S	29E	9	:															:

POU County: POWER

Non-Irrigation Uses: 2 HOMES

Other Rights: 35-12690, 35-12692, 35-13068

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
- DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
- GALLONS PER DAY.

Dates: Exam Made Date: Verified Date: Objection Filed Date:

Misc: Water District Number: Field Inspection Flag:
Presumption Flag:

Audit: 11/09/98 JHOAGLAN

parcel # 5

D455-01

D455-02

PROFILED

SCANNED
OCT 07 2005

Vgm 11-10-98

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: **A35-13199**
Date Received: 12/ 3/1997
Receipt No: E023801
Received By: _____

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

1. Name: BOONDOX FARMS LTD PARTNERSHIP 208-226-2029
Address: 2596 QUIGLEY
AMERICAN FALLS ID 83211

2. Date of Priority: NOV 1, 1983

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	29E	9	SE	SE			POWER

5. Description of diverting works:
5 HP PUMP WITH PIPING

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/31	12/31	0.040		
	01/01	gt	.08	gt	

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
2 HOMES

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	29E	9	SE	SE		DOMEST	

11. Place of use in counties: POWER

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SCANNED Date: 12/03/97

OCT 07 2005

A3513199



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

13. Other Water Rights Used:
35-12690, 35-12692, 35-13068

14. Remarks:

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 Organizations:

I do solemnly swear or affirm that I am _____ of
_____, that I have signed the foregoing
_____, that I have signed the foregoing
document in the space below as _____ of
_____, and that the statements contained in the
foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

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 _____

PROFILED

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

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

CIVIL CASE NUMBER: 39576

Identification No. A35-13199

Date Received 12-3-97

Receipt Number 6023801

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Boondox Farms Partnership LTD Phone (208) 226-2029

Mailing Address 2596 Quigley American Falls Zip 83211

2. Date of Priority (Only one per claim) 11-1-1983 Month/Day/Year

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

4. Location of point of diversion is: Township 7S Range 29E

Section 9 , _____ 1/4 of SE 1/4 of SE 1/4, Govt. Lot _____, BM.,

County of Power

Additional points of diversion if any: None

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

5hp pump with piping

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

For	<u>home</u>	purposes from	<u>Jan 1st</u>	to	<u>Dec 31st</u>	amount	<u>.04</u>
			(Both dates are inclusive)				
For	<u>home</u>	purposes from	<u>Jan 1st</u>	to	<u>Dec 31st</u>	amount	<u>.04</u>

7. Total quantity claimed .08 (cfs)

8. Total consumptive use claimed is de minimus

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

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10. Place of use is: Township: 7S Range 29E
Section 9, SE 1/4 of SE 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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

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.
() None or 35-12690 35-12692 35-13068

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree
Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)
(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not X 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 Michaelson Date 12-3-97
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am John Michaelson Partner
of Boondox Farms Partnership Ltd. that I have signed the foregoing
document in the space below as partner of Boondox Farms Partnership Ltd.
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

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

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 3 day of December 19 97



Notary Public Jennifer Hoagland

Residing at Adabo Falls

My Commission Expires 9/23/03

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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OCT 07 2005

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

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

CIVIL CASE NUMBER: 39576

Identification No. 135-13199Date Received 12-3-77Receipt Number EP 23801

**NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.**

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Boondox Farms Partnership L+D Phone (208) 226-2029Mailing Address 2596 Quigley American Falls Zip 832112. Date of Priority (Only one per claim) 11-1-1983 Month/Day/Year3. Source of water supply (Check one) (x) Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source4. Location of point of diversion is: Township 7S Range 29E
Section 9, 1/4 of SE 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of PowerAdditional points of diversion if any: None

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

5 hp pump with piping

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

For	purposes from	Month/Day	to	Month/Day	amount	(cfs)
For <u>home</u>	purposes from	<u>Jan 1st</u>	to	<u>Dec 31st</u>	amount	<u>.04</u>
(Both dates are inclusive)						
For <u>home</u>	purposes from	<u>Jan 1st</u>	to	<u>Dec 31st</u>	amount	<u>.04</u>

7. Total quantity claimed .08 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 2 homes

10. Place of use is: Township: 7S 10E Range 29E
Section 9, SE 1/4 of SE 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

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

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.
() None or 35-12690 35-12692 35-13068

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

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

Number of Attachments American Falls

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

Signature of Claimant (s) Garvin Michaelson Date 12-3-97

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am Garvin Michaelson Partner

of Boondox Farms Partnerships Ltd. Title _____, that I have signed the foregoing

document in the space below as Partner of Boondox Farms Partnerships LTD
Title _____ Organization _____

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)

) SS.

County of _____)

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 3 day of December 19 97

SEAL

Notary Public Jennifer Hoagland

Residing at Adabo Falls

My Commission Expires 9/23/03

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant