

05/15/2006

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

RIGHT NUMBER: 75-4064

NAME AND ADDRESS: FLOSSIE E ERNST
PO BOX 35
NORTH FORK ID 83466

SOURCE: NORTH FORK SALMON RIVER

TRIBUTARY: SALMON RIVER

QUANTITY: 0.050 CFS

PRIORITY DATE: 05/01/1955

POINT OF DIVERSION:

T24N R21E S9 NWSW Within LEMHI County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
IRRIGATION

PERIOD OF USE
4/01 11/01

QUANTITY
0.050 CFS

PLACE OF USE: IRRIGATION Within LEMHI County

T24N R21E S09 NWSW 2.00 T24N R21E S09 SWSW 0.50

2.5 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 - Beneficial Use

Idaho Department of Water Resources

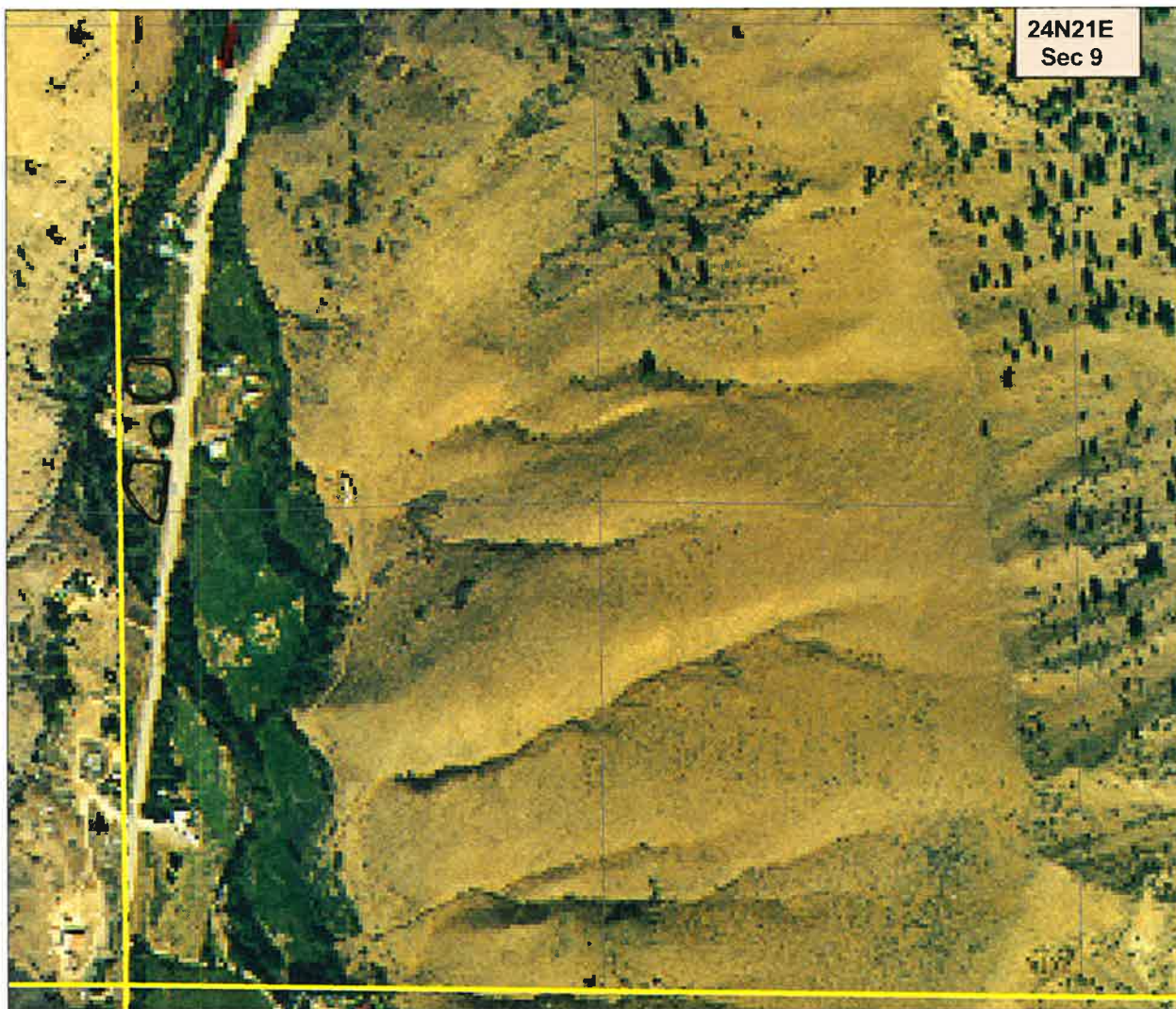


Adjudication Claim Number: **75-4064**



Legend

-  Section Lines
-  24N21E GCDB



0 0.2 0.4 Miles

A horizontal scale bar with markings at 0, 0.2, and 0.4 miles.

Prepared by M. Van Bussum
On Tuesday, May 10, 2005
1991 Aerial Photography

11/20/2006

**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: 12/13/2006

Water right number: 75-4064

FLOSSIE E ERNST

PO BOX 35

NORTH FORK ID 83466

Telephone Number: (208)865-2154

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: 12-1-06

SIGNATURE: Flossie Ernst

Please print your name: FLOSSIE ERNST

IDWR Regional Office, 7600 Mineral Drive, Suite 100, Coeur D' Alene, ID 83815, 2087622800

RECEIVED

DEC 11 2006

IDWR/North

SCANNED
DEC 12 2006

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION SECTION
CLAIM VERIFICATION FIELD EXAM SHEET
(Use with the ECVR)**

CLAIM NO(s).

A75 04064

1. ☒ No Change NAME IS SAME

☐ NEW OWNER:

☐ No Change ADDRESS

☒ NEW ADDRESS: P.O. Box 35 North Fork, Id. 83466

2. ☐ No Change - DATE OF PRIORITY: Completed evidence submitted

☐ Incomplete - Claimant should be asked during the exam when was water first used and submit proof of date of priority.

Priority date, per claimant, is: _____

(If the priority date, based on your exam, seems questionable, explain below.)

3. ☒ No Change — SAME SOURCE

☐ Source is different than that claimed:

Source found: _____

4. ☐ No Change — POINT OF DIVERSION

G.P.S 054

☐ Point of diversion is different than the claim and/or new P/D's:

GPS Site Tag No.: A0014962

Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____
Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____

5. ☒ No Change - DESCRIPTION OF DIVERTING WORKS

☐ Incomplete description, list below:

6. ☒ No Change - WATER USES
☐ Different uses, (list uses found):

Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____
Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____
Use _____	From _____	To _____	Amount _____	CFS _____	AFA _____

7. ☐ No Change - TOTAL VOLUME

☐ Incomplete on claim, the total is, Amount _____ CFS _____ AFA _____

☐ Changes found, the new total is, Amount _____ CFS _____ AFA _____

8. ☒ No Change - NON-IRRIGATION USES:

☐ Changes Exam found:

Domestic # of homes: _____ Stock # _____ List types: _____

Additional comments: _____

9. ☒ No Change — PLACE OF USE: (If changed, list below.)

Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____
Use: _____	Township _____	Range _____	Section _____	1/4 _____	1/4 _____

Remarks: (Comments pertinent to field examination) ☐ See additional attachment

☐ SYSTEM DIAGRAM INCLUDED ☐ NA

☐ Shown on GIS Layout

☐ CK IF IN OFFICE EXAM
DATE EXAM CONDUCTED: _____

FIELD EXAMINER: _____

Print Name
Jack Z. Ellis
Signature

SCANNED
OCT 08 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: A75-04064
Date Received: 4/25/1990
Receipt No: 11006750
Received By: RIF

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: FLOSSIE E. ERNST 208-865-2154
Address: P.O. BOX 1135
NORTH FORK, ID 83466

2. Date of Priority: MAY 01, 1955

3. Source: SALMON RIVER, NORTH FORK Trib. to: SALMON RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
24N	21E	8		NE	SE		LEMHI

5. Description of diverting works:
1/2 HP PUMP, PIPED 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	0.050		

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

8. Total consumptive use is 6.2 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
24N	21E	9	NW	SW		IRR	2.0
			SW	SW		IRR	1.0
Section Acres							3.0

A75-04064

Page 1

Date: 04/25/90

MICROFILMED

DEC 15 1992

A7504064



10. Place of Use: Continued

Total Acres 3.0

11. Place of use in counties: LEMHI

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

13. Other Water Rights Used:
NONE

14. Remarks:
AC. IRR.=2.5.

15. Basis of Claim: STATUTORY CLAIM

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): Thelma E. Ernst Date: 4-25-90

Date: _____

State of Idaho)
County of Lemhi) SS.

Subscribed and sworn (or affirmed) before me this 25 day
of April 19 90

John Dal Lanza
Notary Public

Seal

Residing at Boise Id
My Commission Expires 6/2/94