

09/27/2006

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

RIGHT NUMBER: 75-4189

NAME AND ADDRESS: ROBERT L GRISSETT
129 S ST CHARLES RD
SALMON ID 83467

MARLENE A BOWEN-GRISSETT
129 S ST CHARLES RD
SALMON ID 83467

SOURCE: SPRINGS

TRIBUTARY: SLOUGH

QUANTITY: 0.090 CFS

PRIORITY DATE: 03/10/1928

POINT OF DIVERSION:

T21N R22E S18 SENW Lot 2 Within LEMHI County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

IRRIGATION

4/01 11/01

0.090 CFS

PLACE OF USE: IRRIGATION Within LEMHI County

T21N R22E S18 Lot 2 SENW 3.00

3 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

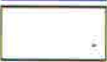


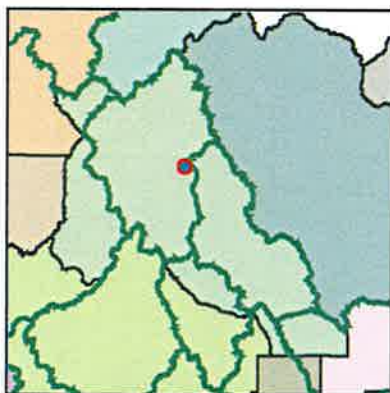
Idaho Department of Water Resources

SRBA Claim:

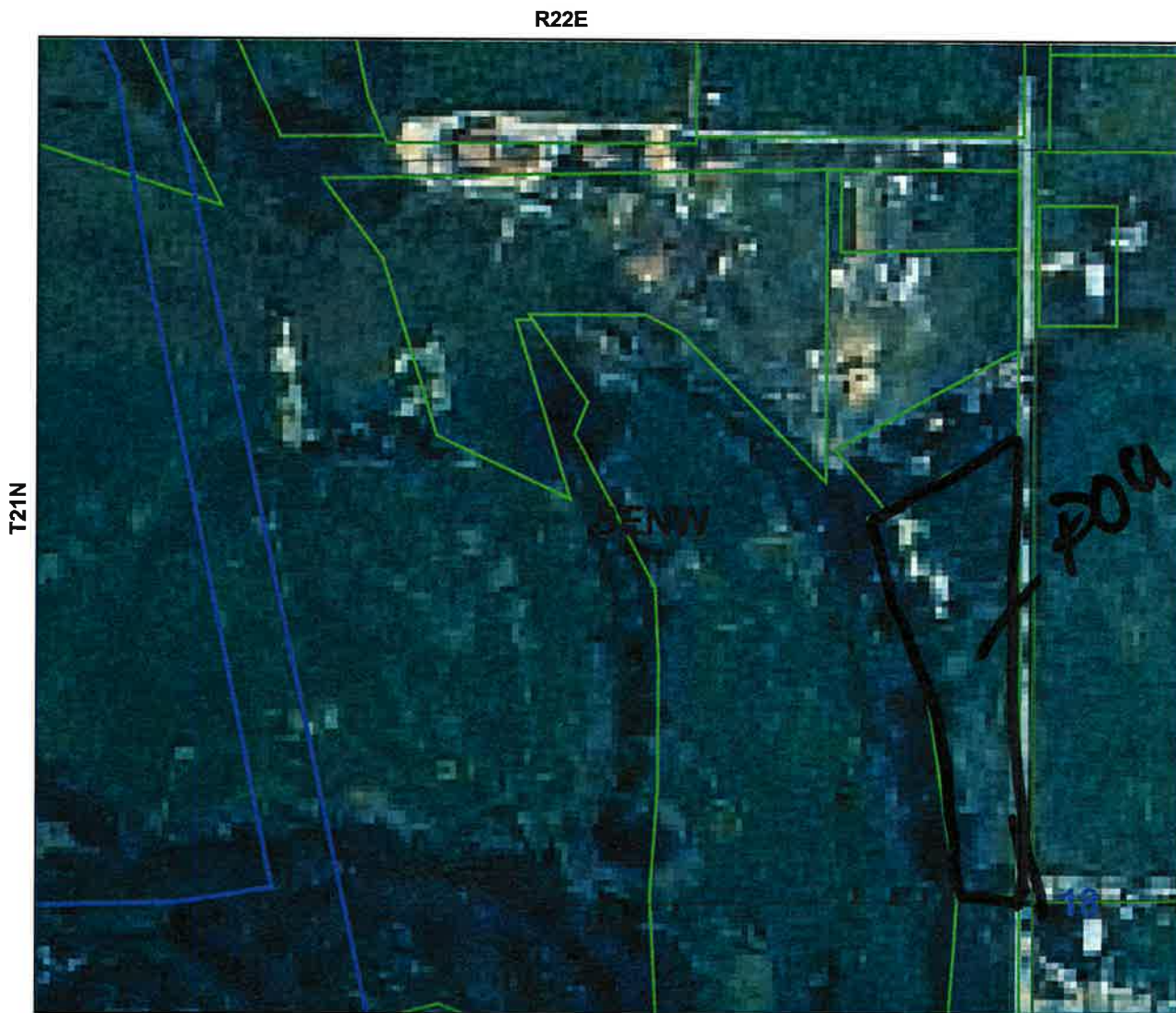
75-4189

Legend

-  Townships
-  PLS Sections
-  Quarter Quarters
-  Parcels



Lemhi County
IDWR Basin 75



0 0.1 0.2 Miles

Prepared by R. Brown
On Tuesday, May 16, 2006
1987/88 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: 75-4189

ROBERT L GRISSETT
129 S ST CHARLES RD
SALMON ID 83467
Telephone Number: (208)756-4372

MARLENE A BOWEN-GRISSETT
129 S ST CHARLES RD
SALMON ID 83467
Telephone Number: (208)756-4372

RECEIVED

DEC 11 2006

IDWR/North

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: 1 Dec 06 SIGNATURE: Robert L Grissett
Marlene A. Bowen-Grissett
Please print your name: ROBERT + MARLENE BOWEN-GRISSETT

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

SCANNED

DEC 12 2006



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Boise, ID 83706 - P.O. Box 83720, Boise, ID 83720-0098
Phone: (208) 327-7900 Fax: (208) 327-7866 Web Site: www.idwr.state.id.us

RECEIVED

MAY 25 2004
DEPARTMENT OF
WATER RESOURCES

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

May 12, 2004

MARLENE

ROBERT AND MARLEYE GRISSETT
129 S ST CHARLES RD
SALMON ID 83467

*Records Modified 5-26-04
cc: W.A.*

RE: Snake River Basin Adjudication (SRBA)
Notice of Claim to a Water Right #75-4189
and Decree #75-10675

Dear Claimants:

Mail we sent to you was returned undeliverable. We have enclosed the returned mail. Although we have reached you at the address above, we need your written confirmation this is your correct mailing address before we can change our records.

Please sign your name at the bottom of this letter and return it to this office. Make corrections to your name and address if necessary before returning this letter, list any other water rights you have, and return this letter by May 25, 2004. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records. Be sure to list your water right numbers.

If there has been a change in ownership of the property connected with the water right claim(s) referenced above, please call this office toll-free at 1/800-451-4129 so we can contact the new owner(s) regarding their water right(s) and updating our records.

Sincerely,

Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region
Enclosure:

Returned Mail

#####

The address is correct as shown above or as otherwise changed.

Water Right Holder's Signature

756-4372

Telephone No.

SCANNED

MAY 25 2004

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

Return Service Requested

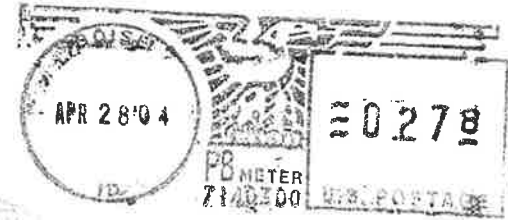
75-4189 clm
75-10675 deeded

ROBERT L GRISSETT

MARLENE A BOWEN-GRISSETT
RT 1 BOX 142
SALMON ID 83467

129 S. ST. CHARLES RD.

PRE-SORTED
FIRST CLASS



RECEIVED
MAY 17 2004

Department of Water Resources

SCANNED
MAY 14 2004

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

CLAIM NO(s).

75-4189

1. ☒ No Change NAME IS SAME

☐ NEW OWNER: _____

☒ No Change ADDRESS

☐ NEW ADDRESS: _____

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

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

GPS Site Tag No.: AED16021

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:

spring to ~~water~~ hand pump (2)
to sprinkler (1.5 HP) (1 HP)
10' lift 5' lift
see attached sheet

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: 07-17-06

FIELD EXAMINER: Asher Barton

Print Name

Signature

PUMPING STATION DISCHARGE

Pumping Plant Efficiency =

0.8

$Q = 8.8 * Hp * \text{eff}/\text{lift} + 2.31(\text{psi})$

Pressure at Well Head =

40 psi

Horsepower

		0.5	1	1.5	2	2.5	3	3.5	4	4.5	5	5.5	6	6.5	7	7.5
	5	0.04	0.07	0.11	0.14	0.18	0.22	0.25	0.29	0.33	0.36	0.40	0.43	0.47	0.51	0.54
	10	0.03	0.07	0.10	0.14	0.17	0.21	0.24	0.28	0.31	0.34	0.38	0.41	0.45	0.48	0.52
	15	0.03	0.07	0.10	0.13	0.16	0.20	0.23	0.26	0.29	0.33	0.36	0.39	0.43	0.46	0.49
	20	0.03	0.06	0.09	0.13	0.16	0.19	0.22	0.25	0.28	0.31	0.34	0.38	0.41	0.44	0.47
	25	0.03	0.06	0.09	0.12	0.15	0.18	0.21	0.24	0.27	0.30	0.33	0.36	0.39	0.42	0.45
	30	0.03	0.06	0.09	0.12	0.14	0.17	0.20	0.23	0.26	0.29	0.32	0.35	0.37	0.40	0.43
	35	0.03	0.06	0.08	0.11	0.14	0.17	0.19	0.22	0.25	0.28	0.30	0.33	0.36	0.39	0.41
	40	0.03	0.05	0.08	0.11	0.13	0.16	0.19	0.21	0.24	0.27	0.29	0.32	0.35	0.37	0.40
	45	0.03	0.05	0.08	0.10	0.13	0.15	0.18	0.20	0.23	0.26	0.28	0.31	0.33	0.36	0.38
	50	0.02	0.05	0.07	0.10	0.12	0.15	0.17	0.20	0.22	0.25	0.27	0.30	0.32	0.35	0.37
	55	0.02	0.05	0.07	0.10	0.12	0.14	0.17	0.19	0.21	0.24	0.26	0.29	0.31	0.33	0.36
D	60	0.02	0.05	0.07	0.09	0.12	0.14	0.16	0.18	0.21	0.23	0.25	0.28	0.30	0.32	0.35
e	65	0.02	0.04	0.07	0.09	0.11	0.13	0.16	0.18	0.20	0.22	0.25	0.27	0.29	0.31	0.34
p	70	0.02	0.04	0.07	0.09	0.11	0.13	0.15	0.17	0.20	0.22	0.24	0.26	0.28	0.30	0.33
t	75	0.02	0.04	0.06	0.08	0.11	0.13	0.15	0.17	0.19	0.21	0.23	0.25	0.27	0.29	0.32
h	80	0.02	0.04	0.06	0.08	0.10	0.12	0.14	0.16	0.18	0.20	0.22	0.25	0.27	0.29	0.31
	85	0.02	0.04	0.06	0.08	0.10	0.12	0.14	0.16	0.18	0.20	0.22	0.24	0.26	0.28	0.30
t	90	0.02	0.04	0.06	0.08	0.10	0.12	0.14	0.15	0.17	0.19	0.21	0.23	0.25	0.27	0.29
o	95	0.02	0.04	0.06	0.08	0.09	0.11	0.13	0.15	0.17	0.19	0.21	0.23	0.24	0.26	0.28
	100	0.02	0.04	0.05	0.07	0.09	0.11	0.13	0.15	0.16	0.18	0.20	0.22	0.24	0.26	0.27
W	105	0.02	0.04	0.05	0.07	0.09	0.11	0.12	0.14	0.16	0.18	0.20	0.21	0.23	0.25	0.27
a	110	0.02	0.03	0.05	0.07	0.09	0.10	0.12	0.14	0.16	0.17	0.19	0.21	0.23	0.24	0.26
t	115	0.02	0.03	0.05	0.07	0.08	0.10	0.12	0.14	0.15	0.17	0.19	0.20	0.22	0.24	0.25
e	120	0.02	0.03	0.05	0.07	0.08	0.10	0.12	0.13	0.15	0.17	0.18	0.20	0.22	0.23	0.25
r	125	0.02	0.03	0.05	0.06	0.08	0.10	0.11	0.13	0.15	0.16	0.18	0.19	0.21	0.23	0.24
	130	0.02	0.03	0.05	0.06	0.08	0.09	0.11	0.13	0.14	0.16	0.17	0.19	0.21	0.22	0.24
	135	0.02	0.03	0.05	0.06	0.08	0.09	0.11	0.12	0.14	0.15	0.17	0.19	0.20	0.22	0.23
	140	0.02	0.03	0.05	0.06	0.08	0.09	0.11	0.12	0.14	0.15	0.17	0.18	0.20	0.21	0.23
	145	0.01	0.03	0.04	0.06	0.07	0.09	0.10	0.12	0.13	0.15	0.16	0.18	0.19	0.21	0.22
	150	0.01	0.03	0.04	0.06	0.07	0.09	0.10	0.12	0.13	0.15	0.16	0.17	0.19	0.20	0.22
	155	0.01	0.03	0.04	0.06	0.07	0.09	0.10	0.11	0.13	0.14	0.16	0.17	0.18	0.20	0.21
	160	0.01	0.03	0.04	0.06	0.07	0.08	0.10	0.11	0.13	0.14	0.15	0.17	0.18	0.20	0.21
	165	0.01	0.03	0.04	0.05	0.07	0.08	0.10	0.11	0.12	0.14	0.15	0.16	0.18	0.19	0.21
	170	0.01	0.03	0.04	0.05	0.07	0.08	0.09	0.11	0.12	0.13	0.15	0.16	0.17	0.19	0.20
	175	0.01	0.03	0.04	0.05	0.07	0.08	0.09	0.11	0.12	0.13	0.14	0.16	0.17	0.18	0.20
	180	0.01	0.03	0.04	0.05	0.06	0.08	0.09	0.10	0.12	0.13	0.14	0.16	0.17	0.18	0.19
	185	0.01	0.03	0.04	0.05	0.06	0.08	0.09	0.10	0.11	0.13	0.14	0.15	0.16	0.18	0.19
	190	0.01	0.02	0.04	0.05	0.06	0.07	0.09	0.10	0.11	0.12	0.14	0.15	0.16	0.17	0.19
	195	0.01	0.02	0.04	0.05	0.06	0.07	0.09	0.10	0.11	0.12	0.13	0.15	0.16	0.17	0.18
	200	0.01	0.02	0.04	0.05	0.06	0.07	0.08	0.10	0.11	0.12	0.13	0.14	0.16	0.17	0.18
	205	0.01	0.02	0.04	0.05	0.06	0.07	0.08	0.09	0.11	0.12	0.13	0.14	0.15	0.17	0.18
	210	0.01	0.02	0.03	0.05	0.06	0.07	0.08	0.09	0.10	0.12	0.13	0.14	0.15	0.16	0.17

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: A75-04189
Date Received: 5/14/1990
Receipt No: E014536
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT L. GRISSETT 208-756-4372
Address: RT. 1 BOX 142
SALMON, ID 83467

AND

Name: MARLENE A. BOWEN-GRISSETT 208-756-4372
Address: RT. 1 BOX 142
SALMON, ID 83467

2. Date of Priority: MAR 10, 1928

3. Source: SPRINGS Trib. to: SLOUGH
SEEPAGE SLOUGH

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
21N	22E	18	NE	SE	NW		LEMHI
			SE	SE	NW		LEMHI

5. Description of diverting works:
CANVAS DAM.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.090		

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

8. Total consumptive use is 7.5 Acre Feet Per Annum.

9. Non-irrigation uses:

MICROFILMED
DEC 15 1992

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
21N	22E	18	SE	NW		IRR	3.0
Section Acres							3.0
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:

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): _____ Date: _____
_____ Date: _____

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: A75-04189

Date Received:

Receipt No: E014536Received By: 5/10/90

RECEIVED

MAY 14 1990

Department of Water Resources
Eastern District Office

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT L. GRISSETT & MARLENE A. BOWEN-GRISSETT 208-756-4372
Address: RT. 1 BOX 142
SALMON, ID 83467

2. Date of Priority: MAR 10, 1928

3. Source: SPRINGS
SEEPAGE

Trib. to: SLOUGH
SLOUGH

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
21N	22E	18	NE	SE	NW		LEMHI
			SE	SE	NW		LEMHI

5. Description of diverting works:
CANVAS DAM.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.090		

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

A.F.A.

8. Total consumptive use is 7.5 Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
21N	22E	18	SE	NW		IRR	3.0
						Section Acres	3.0

A75-04189

Page 1

Date: 05/09/90

A7504189



MICROFILMED

DEC 15 1992

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:

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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

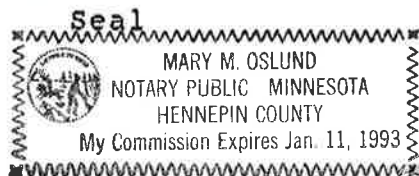
I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct. 1

Signature of Claimant(s): Robert S. Gusselt Date: 10 May 1990
Marlene A. Bowen-Gusselt Date: 10 May 1990
 minnesota

State of Minnesota)
County of Hennepin) ss.

Subscribed and sworn (or affirmed) before me this 10th day
of May 19 90 Mary M. O.
Notary Public

Mary M. Osburn
Notary Public



Residing at VA Medical Center - Mpls. Mo.
My Commission Expires Jan 11, 1993

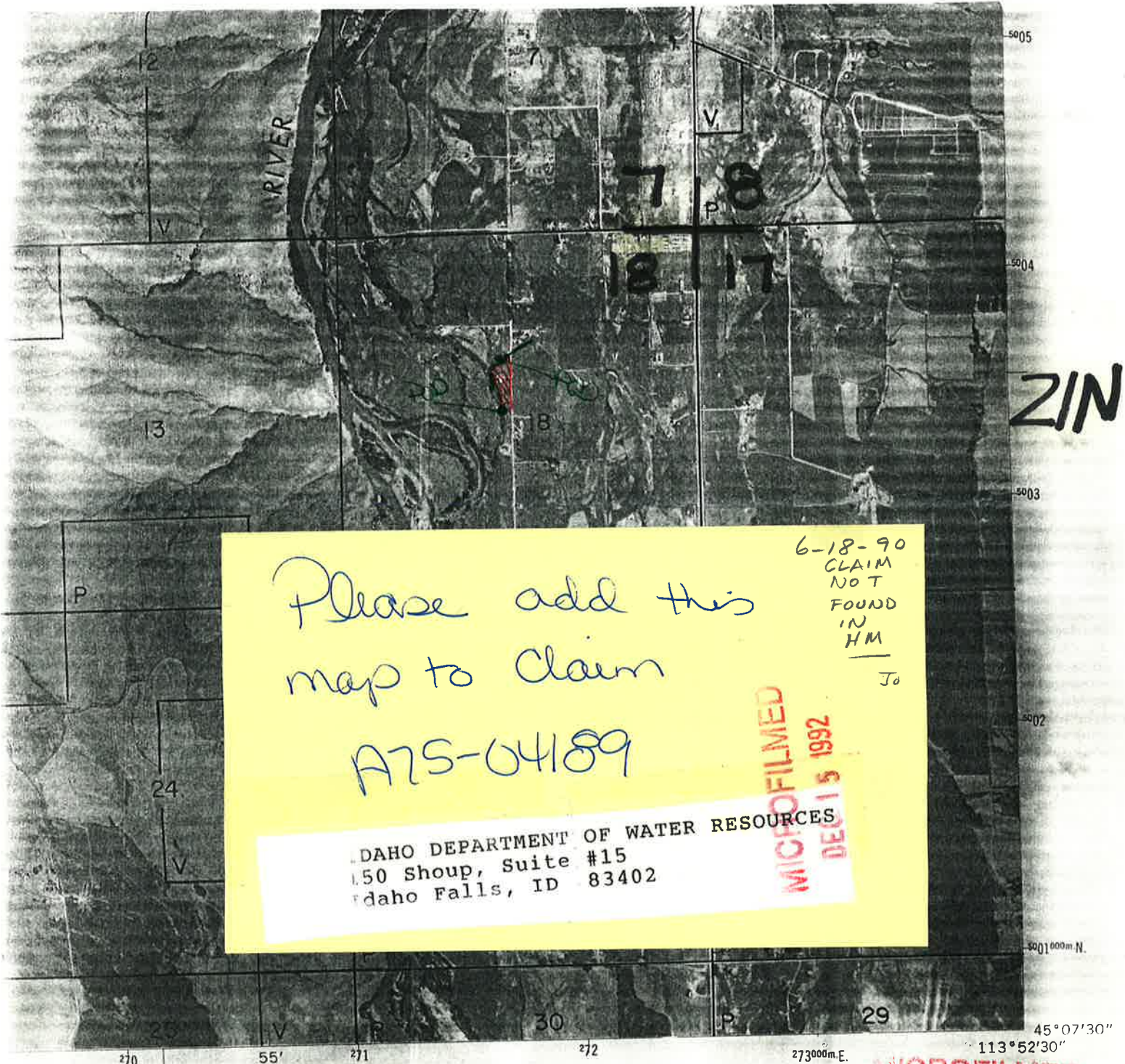
A75-04189

RECEIVED

MAY 24 1990

Department of Water Resources
Eastern District Office

22E



Please add this
map to claim

A75-04189

IDAHO DEPARTMENT OF WATER RESOURCES
150 Shoup, Suite #15
Idaho Falls, ID 83402

6-18-90
CLAIM
NOT
FOUND
IN
HM

To

MICROFILMED
DEC 15 1992

5000 6000 7000 FEET
1 KILOMETRE

PRINCIPAL NUMBERED HIGHWAYS
Interstate Route U. S. Route State Route

MICROFILMED
DEC 15 1992