

06/18/2002

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

RIGHT NUMBER: 37-12910

NAME AND ADDRESS: DON MC FARLAND
PO BOX 5178
TWIN FALLS ID 83303

CAROL MC FARLAND
PO BOX 5178
TWIN FALLS ID 83301

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 2,500
GALLONS PER DAY.

PRIORITY DATE: 07/05/1974

POINT OF DIVERSION:

T06S R14E S31 NWSESE Within GOODING County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
DOMESTIC	01/01 12/31	0.040 CFS
DOMESTIC USE IS IN A POTATO CELLAR AND SHOP BUILDINGS.		

PLACE OF USE: DOMESTIC Within GOODING County

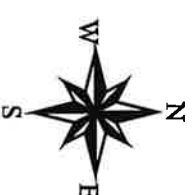
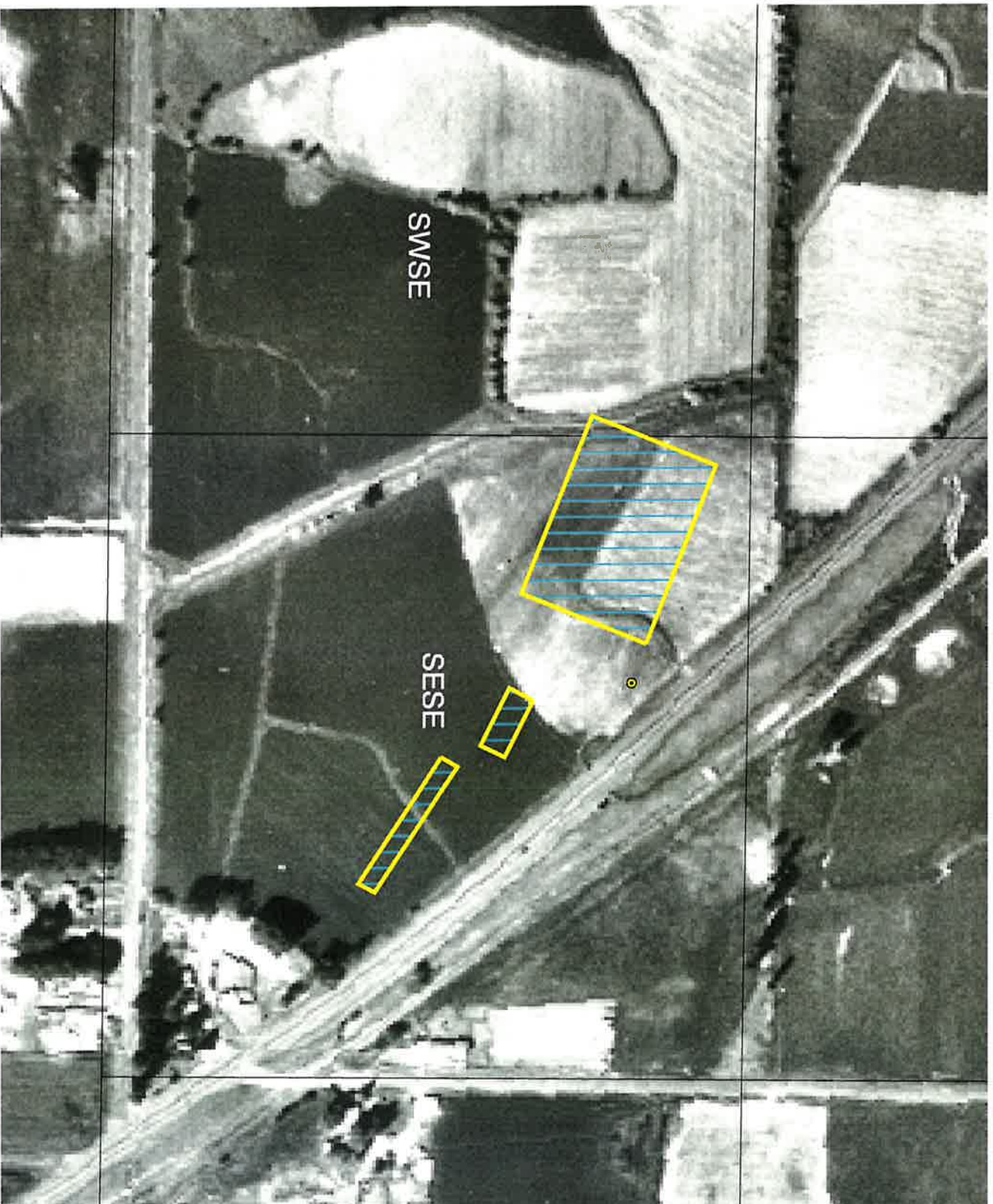
T06S R14E S31	SWSE	T06S R14E S31	SESE
---------------	------	---------------	------

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.
THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: Beneficial Use

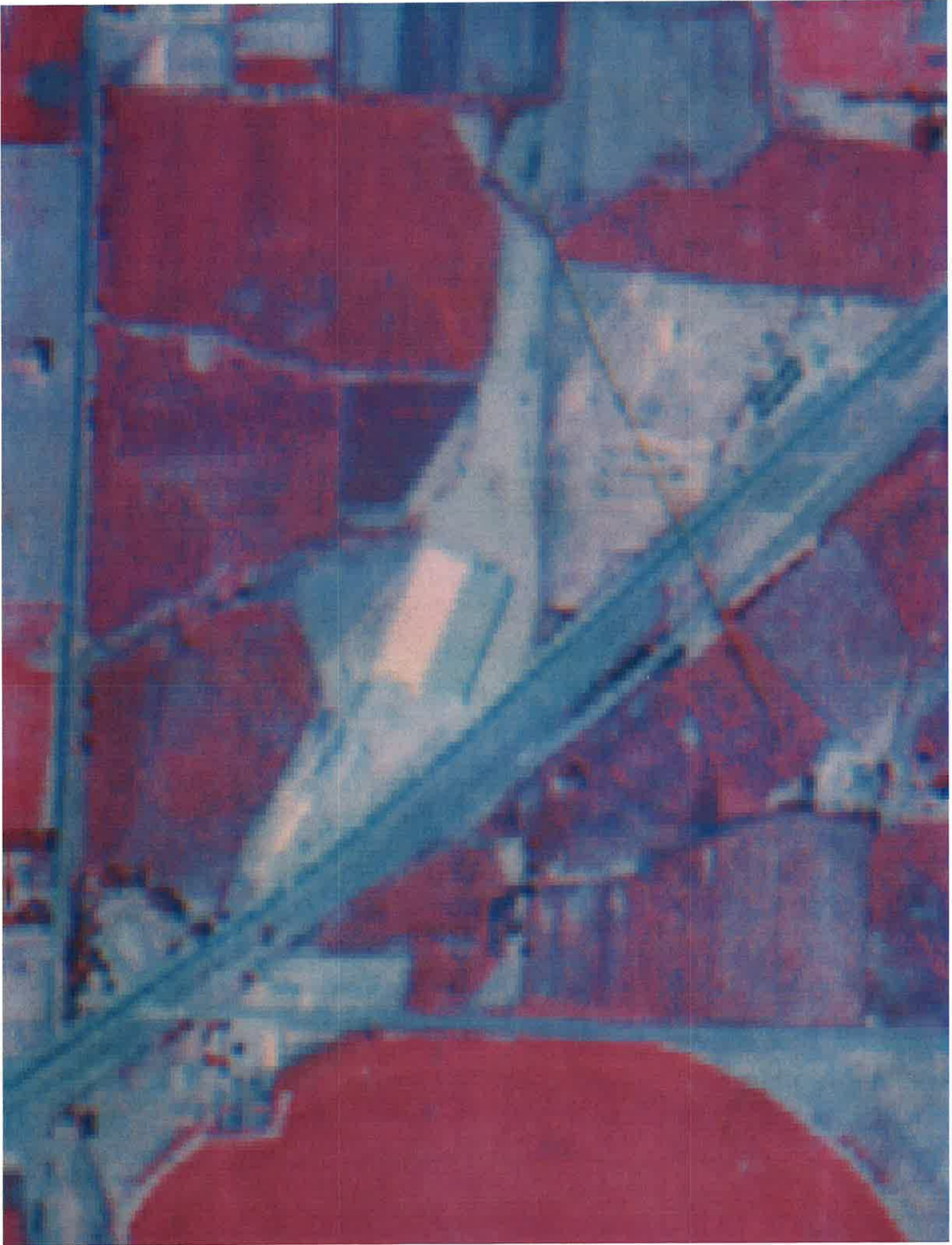
37-12910



T06S R14E
S31
1970

37- 12910 5-16-1992





RI4E

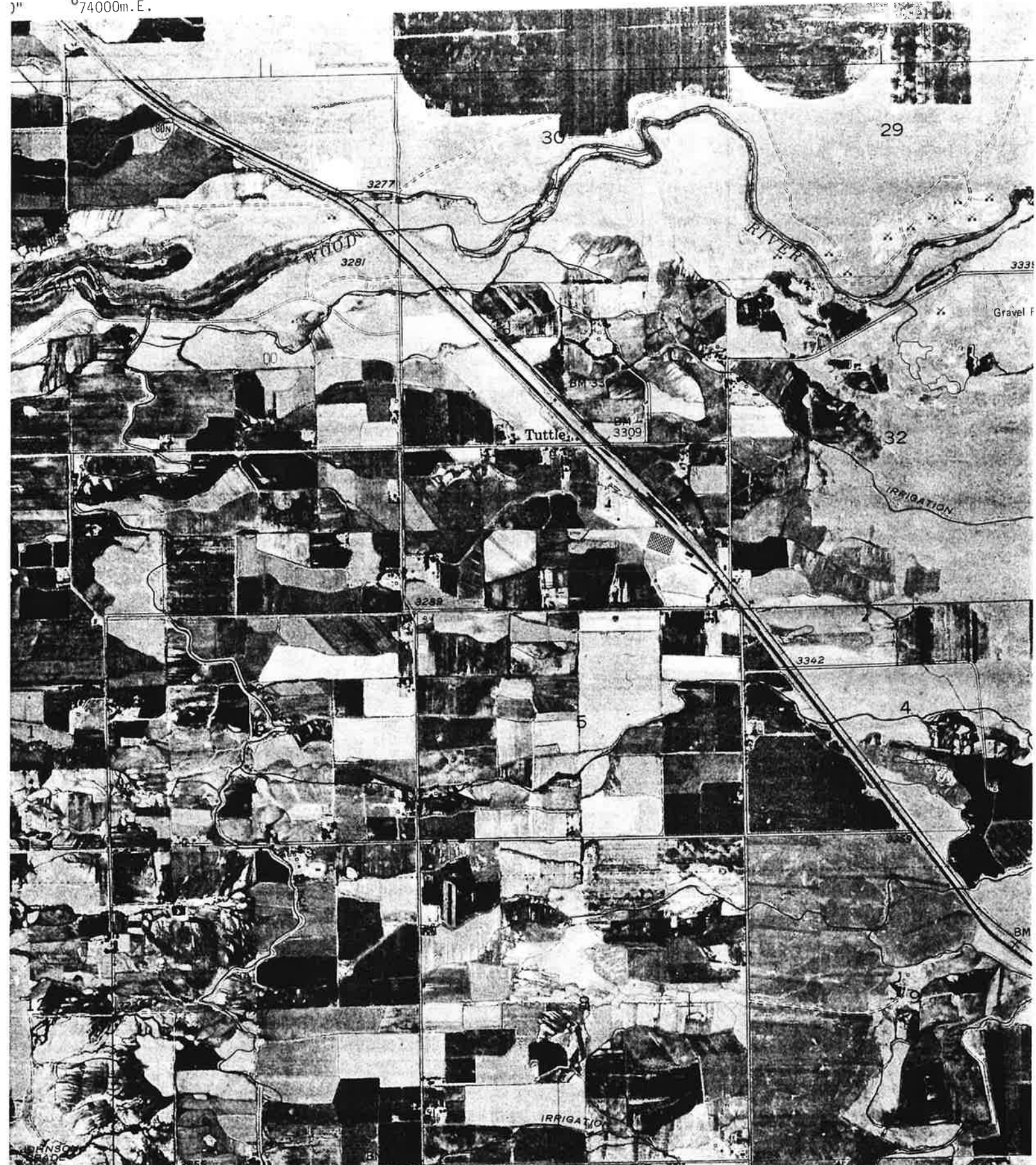
37-12910

QQ AA70

8-4-1974 photo

RESOURCES
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

674000m. E.





IDAHO DEPARTMENT OF WATER RESOURCES
SOUTHERN REGION
1341 FILLMORE STREET, SUITE 200
TWIN FALLS ID 83301-3380
(208) 736-3033

37-12910
PHILIP E BATT
GOVERNOR

KARL J DREHER
DIRECTOR

October 9, 1997

Don McFarland
Attn: His assistant

Ladies and Gentlemen,

I apologize but I forgot who the person I spoke with earlier today. The woman that I spoke with was working with me on the water rights for Don McFarland in the Gooding area for West East Snake Plain Measurement District (WMD).

As we discussed earlier today on the telephone Mr. McFarland has four wells in the WMD that are required to be measured. However, I performed a theoretical analysis on these wells and discovered that if I have the correct horsepower information on these wells, their capacity is below the WMD requirement of monitoring all wells with a diversion rate of greater than .24 cfs. This means that Mr. McFarland has two options, (1.) He could install meters on all four of these wells and pay the yearly assessment to the WMD of \$ 235.73. (2.) He could come in and amend his claim to .24 cfs or below and be waived from measurement and have this year's assessment refunded to him.

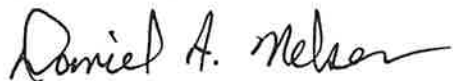
The decision to retain the water rights or to amend the claims is entirely up to you. However, I would like to let you know that these diversion rates are all based off of adjudication claims. Generally, these adjudication claims are recorded way out of proportion in order to guarantee that you will not be short of water after the adjudication process has finished. However, these adjudication are limited to the actual capacity of the pump if you decide to transfer or move the water right. Therefore, it may be in your best interest to amend your claims and forgo the cost of installing flow meters and paying the yearly assessment.

The theoretical calculation I made were calculated using information gathered by Cindy Hodges of the State Office of the Idaho Department of Water Resources (IDWR). I you strongly recommend that you double check with your well installer and make sure that the horsepower used on these theoretical analysis's are correct. The following is the theoretical diversion rates I calculated for the following water rights.:

WATER RIGHT NUMBER	WELL NAME	WATER RIGHT DIVERSION RATE	THEORETICAL DIVERSION RATE
A37-12906	1400 E ROAD	0.44 cfs	0.14 cfs
A37-12910	OLD MALAD HIGHWAY	1.00 cfs	0.03 cfs
A37-12908	SHOESTRING ROAD	0.28 cfs	0.16 cfs
A37-12905	SOUTH 1700 EAST ROAD	0.50 cfs	0.05 cfs

I have also included a profile report for each water right with this fax so you will be better able to identify each water right. You should contact me as soon as possible to let me know if you plan to amend these claims so we can complete the paper work before the first of the year and refund this year's assessment to you. If you have any questions please contact me at the above address or telephone number.

Sincerely,



Daniel A. Nelson
Water Right Agent
Southern Office
Idaho Department of Water Resources

WEST ESPA MEASUREMENT DISTRICT REVIEW FORM

Inventory
7-31-97
cjhCURRENT OWNER: Don McFarlandPHONE NUMBER: 736 0004

ADDRESS: _____

WATER RIGHT NUMBERS: A37-12910GPS FILE NAME: C073114A offset = 10' NWELL SITE TAG NUMBER: A0006753 loc = door frame of shed
(well behind shed)WELL NAME: Old Malad HwyLEGAL DESCRIPTION: T6S R14E SEC.31 1/4 1/4 SE 1/4 SEPUMP: No info

MANUFACTURER: _____

SERIAL NUMBER: _____

MODEL NUMBER: _____

TYPE: _____

IMPELLER DIAMETER: _____ RATED SPEED: _____

RATED DISCHARGE: _____ RATED HEAD: _____

MOTOR: No info

MANUFACTURE: _____

SERIAL NUMBER: _____

RATED HORSEPOWER: 1 HP per Tim Bullens PHASE: _____

RATED AMPS: _____ RATED VOLTS: _____

RATE SPEED: _____ SERVICE FACTOR: _____

Est. at 0.03 cfs

BOOSTER PUMP:

MANUFACTURER: _____

SERIAL NUMBER: _____

MODEL NUMBER: _____

TYPE: _____

IMPELLER DIAMETER: _____ RATED SPEED: _____

RATED DISCHARGE: _____ RATED HEAD: _____

BOOSTER MOTOR:

MANUFACTURE: _____

SERIAL NUMBER: _____

RATED HORSEPOWER: _____ PHASE: _____

RATED AMPS: _____ RATED VOLTS: _____

RATE SPEED: _____ SERVICE FACTOR: _____

KILOWATT HOUR METER:

UTILITY: _____

MANUFACTURER: _____

METER SERIAL NUMBER: _____

POLE NUMBER: _____ RATED VOLTAGE: _____

DISK CONSTANT (Kh): _____ MULTIPLIER (MULT): _____

DEMAND: _____ CTR OR PTR: _____

TYPE OF MEASUREMENT REQUIRED:

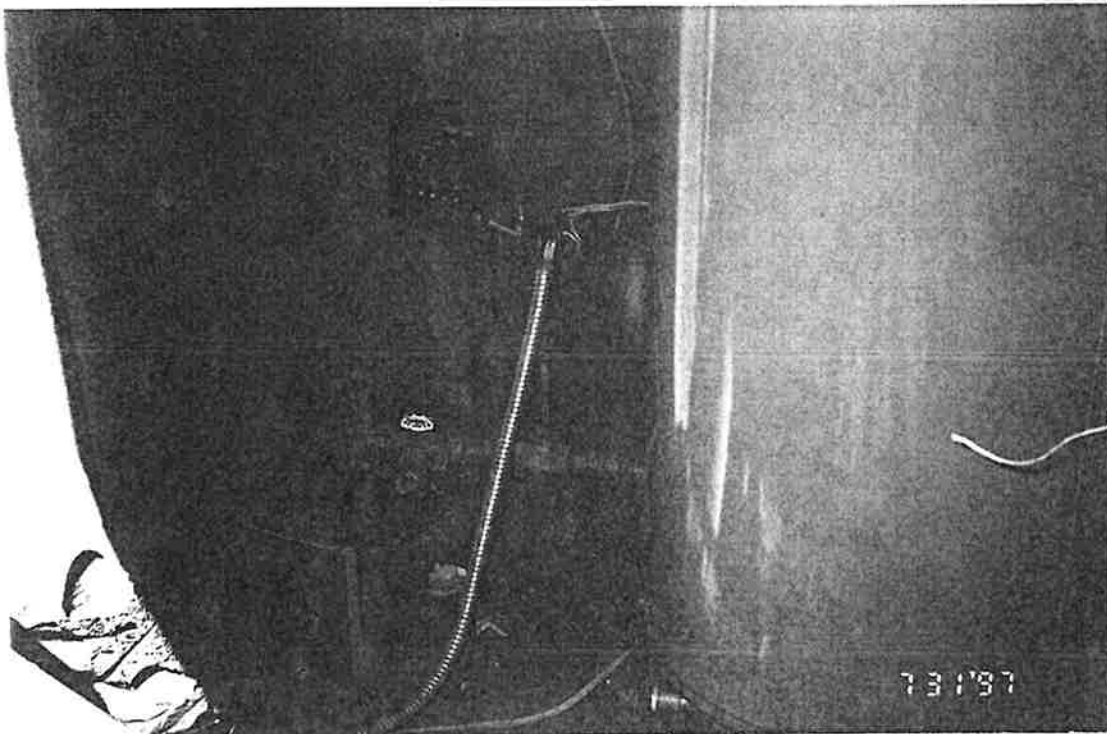
PCC: _____ METER: _____ TIME CLOCK: _____ OTHER (EXPLAIN): _____

COMMENTS: potato cellar - offices, etc. no longer used

USE IS likely exempt <18 gpm. 2500 gpm

Need verification fr. owner / claim amendment

MAP OR DRAWING OF SYSTEM



GROUNDWATER MEASUREMENT REQUIREMENT ANALYSIS

FILE: _____
DATE: _____
BY: _____

THEORETICAL RATE OF FLOW: $Q = \frac{(8.8) \times (H.P.) \times (EFF.)}{TDH}$

Q = CFS
H.P. = Total Brake Horsepower of pumping plant (including booster)
EFF. = Pumping plant efficiency (ASSUME 70% OR 0.70)
TDH = total dynamic head = [(LIFT) + (PSI X 2.31)]
LIFT = depth to water in FEET from land surface to pumping water level
PSI = pumping pressure measured in psi near pump (if open discharge assume zero [0])

$$Q = \frac{(8.8) \times (1 HP) \times (0.70)}{[(.164) + (20 \times 2.31)]} = \frac{6.16}{210.20} = .03 CFS$$

LIFT FROM:	PSI FROM:	NOTES ON PUMP:
measurement ()	measurement ()	Motor Make, Serial or ID
owner ()	owner ()	
area estimate (X)	estimate (X)	Pump Make, Serial or ID, rating
well logs ()	owner gage ()	
Booster (Y) (N)		

REMARKS The minimum static water table for sec. 31 was 164 ft. The other static water tables for that section were 180 ft, 165 ft, and 174 ft.

ANNUAL VOLUME ANALYSIS

POTENTIAL Acre Feet/Acre/Annum = $\frac{(\text{DAYS IN SEASON}) \times (1.98) \times (Q)}{(\text{RECOMMENDED ACRES IRRIGATED})}$

(season)	(days)	
3/15 - 11/15	246	POTENTIAL = $\frac{(\dots) \times (1.98) \times (\dots)}{(\dots)}$
4/1 - 11/1	215	
4/15 - 10/15	184	
3/1 - 12/1	276	

POTENTIAL = _____

REQUIRED Acre Feet/Acre/Annum = _____
(AF/Ann/Ac irrigation requirement from chart for area)
NOTE that this is NOT Consumptive use

IF POTENTIAL IS GREATER THAN REQUIRED THEN NO MEASUREMENT NECESSARY ()

IF POTENTIAL IS LESS THAN REQUIRED THEN MEASUREMENT IS NECESSARY ()

$$\frac{(8.8) (1 HP) (.70)}{(164 ft) + (10 \times 2.31)} = \frac{6.16}{187.10} = .03 CFS$$



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866 www.idwr.state.id.us

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

March 8, 2002

37-12906
DON MC FARLAND
PO BOX 5178
TWIN FALLS ID 83303

RESPONSE DEADLINE
APRIL 12, 2002

Re: Evidence of Priority Date

Dear Claimant:

The Notice of Claim to a Water Right (claim) identified with the number shown above your name has been filed in the Snake River Basin Adjudication (SRBA). The claim indicates your water usage is based on "Beneficial Use" or a "Statutory Claim." Water rights of this type are established by the historical use of water, dating back to when water was first used for the purpose claimed, and are termed beneficial use rights. The date of first use, known as the priority date, has not been confirmed by a License, Decree or Permit. I will be conducting field examinations for the SRBA claims with a Ground Water source in your area in late March and early April. Since the priority date of a beneficial use right cannot be confirmed by field examination, **proof must be provided by the claimant** supporting the priority date claimed.

If you no longer own the property to which the claim is appurtenant please forward this correspondence to the present owner, or return it to Idaho Department of Water Resources (IDWR). If you have received this correspondence from the previous owner of the property it is recommended that you file a Change of Ownership form with IDWR in order to receive future mailings and to participate in the adjudication.

Enclosed you will find a computer printout of your claim and the pamphlet entitled "Evidence of Priority." The pamphlet describes the types of evidence required and suggests which documents will fulfill this requirement.

PLEASE NOTE: IDWR will recommend the SRBA Court decree the claim disallowed if no evidence of a priority date is submitted. It will be to your advantage to provide clear and convincing evidence. If you choose to submit statements from individuals as evidence, the statement should be in the form of a notarized affidavit.

Please submit the required evidence supporting the priority date by the date shown above, referencing all documents with the corresponding claim number. If you have questions not covered by this letter or the enclosed pamphlet, please contact this office. Our toll free number is 1-800-451-4129. If you have multiple claims that require evidence of priority date, the labels with the identification numbers of the additional claims are attached below. Please submit evidence of the priority date for each of your beneficial use rights. Also, if there are multiple claimants of the claim at the same address, the additional claimants are identified on the labels attached below.

Sincerely,

Carter Fritschle
Water Rights Supervisor
Adjudication Bureau

37-12906

37-12908

Enclosures

37-12908
DON MC FARLAND
PO BOX 5178
TWIN FALLS ID 83303

37-12910
DON MC FARLAND
PO BOX 5178
TWIN FALLS ID 83303

37-12910
CAROL MC FARLAND
PO BOX 5178
TWIN FALLS ID 83301



State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037

April 10, 1998

**PHILIP E. BATT
GOVERNOR**

**KARL J. DREHER
DIRECTOR**

DON & CAROL MC FARLAND
PO BOX 268
EDEN ID 83325

RE: Claim amendments: A37-12905, A37-12906, A37-12908, A37-12910

Dear Mr & Mrs McFarland:

Please find the enclosed copies of the amended claims referenced above. These amendments reduce the claimed flow rate to below the threshold for inclusion in the West Measurement District. Review the computer record against the yellow copy of the submitted amendment to check for errors or omissions. Contact this office if you have concerns or questions.

Sincerely

A handwritten signature in black ink, appearing to read 'Douglas Jones', written over a horizontal line.

Douglas Jones, P.E.
Water Rights Supervisor
Southern Adjudication Unit

enc

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: **A37-12910**
Date Received: 3/21/1989
Receipt No: S006623
Received By: _____

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

AMENDED

1. Name: DON MC FARLAND
Address: PO BOX 268
EDEN ID 83325

AND/OR

Name: CAROL MC FARLAND
Address: PO BOX 268
EDEN ID 83325

2. Date of Priority: JUL 5, 1950

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
06S	14E	31		SW	SE		GOODING
				SE	SE		GOODING

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.
DOMESTIC	01/01	12/31	0.240		
COMMERCIAL	01/01	12/31	0.240		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D & C/SHOP BUILDINGS, POTATO STORAGE, OFFICE COMPLEX, LIVING QUAR

10. Place of Use:

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
06S	14E	31	SW		SE		DOMEST	
			SW		SE		COMMER	
			SE		SE		DOMEST	
			SE		SE		COMMER	

11. Place of use in counties: GOODING

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

13. Other Water Rights Used:

NONE

14. Remarks:

1/14/98, DJ: CLAIM AMENDED TO REDUCE FLOW RATE TO BE EXEMPT FROM
WATER MEASUREMENT DISTRICT. CLAIM IS NON-DE MINIMIS.

4/10/98, DJ: UPDATED AMENDED COMMERCIAL USE FLOW RATE MISSED IN
JANUARY EDIT.

15. Basis of Claim: BENEFICIAL USE

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

RECEIVED

CIVIL CASE NUMBER: 39576

Ident. Number

A37-12910

Date Received

Receipt Number

DEC 29 1997

NOTICE OF CLAIM

Department of Water Resources
Southern Region

TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

AMENDED

Please type or print clearly

1. Name of Claimant (s) DON AND/OR CAROL McJARLAND Phone (208) 825-5256

Mailing Address P.O. Box 268, EDEN, ID Zip 83325

2. Date of Priority (Only one (1) per claim) 07/05/1950

3. Source of water supply (a) single well - domestic - commercial
which is tributary to (b) N/A

4. a. Location of existing point of diversion is: Township 06S Range 14E Section 31,
SW 1/4 of SE 1/4 of SE 1/4, Govt. Lot, E B.M., County of Gooding

Additional points of diversion if any: _____

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

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. Submersible Electric Pump

& Pressure System -

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Commercial purposes from 01-01 to 12-31 amount .24 or _____

For Domestic purposes from 01-01 to 12-31 amount .24 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .24 (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.) D & C / Shop Buildings, Potato Storage, Office Complex, Living Quarters.

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	
06S	14E	31															D	D	

Total number of acres irrigated N/A

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

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 (X)

14. Remarks: Place of use location for Commercial is SAME location AS described for: Domestic -

Last Name _____ Ident No. A32-12910

Copies: White -State, Yellow-Claimant

Scale: 2 inches equals 1 mile

[illegible]

Last Name _____

Ident No. A37-12910

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____
Decree _____
If applicable provide IDWR Water Right Number A37-12910
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) Don McFarland Date Dec 29, 1997

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 _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 29th day of December 1997

SEAL

Notary Public Deborah M. Fountain

Residing at Filer, Idaho

My Commission Expires 7/13/2000

Please Print Name Deborah M. Fountain

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 _____ Ident. Number A37-12910

Copies White-State, Yellow-Claimant

AJ5809NP
No. A37-12910

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 07/10/97
PAGE: 13

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	DON MC FARLAND	07/05/1950	COMMERCIAL	01-01 12-31	~~0.20 CFS~~	~~1.24~~ <i>1.24</i>
C	CAROL MC FARLAND		DOMESTIC	01-01 12-31	~~1.00 CFS~~	~~1.24~~ <i>1.24</i>
	PO BOX 268					
	EDEN ID 83325					
TOTAL DIVERSION:					~~1.00 CFS~~	~~1.24~~ <i>1.24</i>

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T06S R14E S31

SWSE SESE

GOODING County

Place of use Legal Description for: DOMESTIC

NE				NW				SW				SE			
NENE	NWNE	SWNE	SENE	NENW	NWNW	SWNW	SENW	NESW	NWSW	SWSW	SESW	NESE	NWSE	SWSE	SESE
T	R	S	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac
06S 14E 31 :															

Place of use location for COMMERCIAL is the same location as described for: DOMESTIC

POU County: GOODING

Non-Irrigation Uses: D & C/SHOP BUILDINGS, POTATO STORAGE, OFFICE COMPLEX, LIVING QUAR

Other Rights: NONE

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

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

old Malad Hwy

*under receipt 5006623
there was \$170 initially
paid. After amendment
the total claim fees
total \$98; therefore no
additional fee due.*

OPTION = 5

*Waive from
measurement*

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: A37-12910
Date Received: 9/01/1988
Receipt No: S006623
Received By: See

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DON MC FARLAND
Address: P.O. BOX 268
EDEN, ID 83325

AND/OR
Name: CAROL MC FARLAND
Address: P.O. BOX 268
EDEN, ID 83325

2. Date of Priority: JUL 05, 1950

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06S	14E	31	SW	SE	SE		GOODING
			SE				GOODING

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.
DOMESTIC	01/01	12/31	1.000		
COMMERCIAL	01/01	12/31	0.200		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D & C/SHOP BUILDINGS, POTATO STORAGE, OFFICE COMPLEX, LIVING QUAR

A37-12910

Page 1

Date: 03/22/89

MICROFILMED

MAR 01 1993

10. Place of Use:

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
06S	14E	31	SW		SE		DOMEST	
			SW		SE		STOCK	
			SE		SE		DOMEST	
			SE		SE		STOCK	

11. Place of use in counties: GOODING

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: _____

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 A37-12910
Date Received _____
Receipt Number 5006623

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

RECEIVED

SEP 1 1988

Department of Water Resources
Southern Region Office

Please type or print clearly

1. Name of Claimant (s) Don + Lor Carol McFarland Phone (208) 825-5258
Mailing Address P.O. Box 268, Eden ID Zip 83325

2. Date of Priority (Only one (1) per claim) 07-05-1980

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

4. a. Location of existing point of diversion is: Township 6S Range 14E Section 31,
_____ 1/4 of S ~~1/2~~ of SE 1/4, Govt. Lot, _____ B.M., County of Gooding

Additional points of diversion if any: _____

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

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,

_____ 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. well & pump

MICROFILMED

MAR 01 1993

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For Domestic purposes from 01-01 to 12-31 amount 1 or _____

For COMMERCIAL purposes from 01-01 to 12-31 amount .20 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 1 (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.) Shop Buildings, Potato Storage, Complex, Office

10. Description of place of use: Buildings, & Living Quarters.

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>6S</u>	<u>14E</u>	<u>31</u>																<u>D/C</u>	

Total number of acres irrigated _____

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

12. Do you own the property listed above as place of use? Yes ☒ 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:

Last Name McFarland Ident No. _____

MICROFILMED
1993
Copies: White - State, Yellow - Claimant

Scale: 2 inches equals 1 mile

A 16x16 grid of squares. Each square contains a crosshair pattern formed by two dashed lines intersecting at the center. The grid is composed of 16 columns and 16 rows of these squares.

MAR 01 1993

Copies: White-State, Yellow-Claimant



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

1/30/89

Nelson - Roskott
RE: McFarland

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # _____ for \$ _____ which you submitted to our office. I am returning these pursuant to Rule 10,4 of the Department's Adjudications Rules and Regulations. In checking your claim it appears that the following items need clarification: (Please review enclosed instructions and use enclosed form to refile claim)

- [] Item #1 Name - Address
- [X] Item #2 Priority
- [X] Item #3 Source
- [X] Item #4 Point of Diversion Legal Description
- [X] Item #5 Description of Diversion Works
- [] Item #6 Uses descriptions
- [] Item #7 Total Diversion Rate
- [] Item #8 Total Consumptive Use
- [] Item #9 Description of Non-irrigation Uses
- [] Item #10 Place of Use Legal Description
- [] Item #11 County of Place of Use
- [] Item #12 Ownership of Property
- [] Item #13 Other water rights for same uses
- [] Item #14 Remarks
- [] Item #15 Basis of Claim
- [] Item #16 Signature & Notorization
- [] Improper fee (THE CORRECT FEE IS \$ _____)

May need
permit

50 + 100 = 150

If you will make any necessary corrections and return the documents with the correct fee before March 1, 1989, your filing will not be assessed an additional late filing fee. Please do not hesitate to contact this office if you have any questions or need further assistance.

Sincerely,

Allen Merritt
Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

MICROFILMED
MAR 11 1993

10. Place a "D" for domestic and "S" for stockwater use in the corresponding place of use below.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
6S	14E	31																

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

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 (X)

14. Remarks: _____

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

If applicable provide IDWR Water Right Number _____
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.

correct.
Signature of Claimant (s) Don McFarland Date 9/1/88

Date _____

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

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 _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 17th day of September 1988

SEAL

Notary Public *Timothy Hernandez*

Residing at Queen Falls

My Commission Expires 10-31-88 NOV 01 1993

Last Name McFARLAND Ident No.

Copies White-State, Yellow-Claimant

AJ0749NP
No. A37-12910

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 08/27/99
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	DON MC FARLAND	07/05/1950	COMMERCIAL	01-01 12-31	0.240 CFS	
C	CAROL MC FARLAND		DOMESTIC	01-01 12-31	0.240 CFS	
	PO BOX 5178					
	TWIN FALLS ID 833035178					
	(208) 734-0004					
					TOTAL DIVERSION:	0.240 CFS

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T06S R14E S31

SWSE

SESE

GOODING County

Place of use Legal Description for: COMMERCIAL

	NE	ENE	NENE	SE	ESE	SESE
T R S	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac
06S 14E 31	:	:	:	:	:	:

Place of use Legal Description for: DOMESTIC

	NE	ENE	NENE	SE	ESE	SESE
T R S	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac	: Lt Ac
06S 14E 31	:	:	:	:	:	:

POU County: GOODING

Non-Irrigation Uses: D & C/SHOP BUILDINGS, POTATO STORAGE, OFFICE COMPLEX, LIVING QUAR

Other Rights: NONE

Remarks: EXP

1/14/98, DJ: CLAIM AMENDED TO REDUCE FLOW RATE TO BE EXEMPT FROM
WATER MEASUREMENT DISTRICT. CLAIM IS NON-DE MINIMIS.

4/10/98, DJ: UPDATED AMENDED COMMERCIAL USE FLOW RATE MISSED IN
JANUARY EDIT.

ADDRESS CHANGE FOR DON AND CAROL MC FARLAND 8/27/99 SS.

Dates:

Exam Made Date:

Verified Date:

Objection Filed Date:

Misc:

Water District Number:

Field Inspection Flag:
Presumption Flag:



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

RECEIVED

AUG 26 1999

Department of Water Resources

DIRK KEMPTHORNE
GOVERNOR

August 24, 1999

KARL J. DREHER
DIRECTOR

DON MC FARLAND
CAROL MC FARLAND
PO BOX 5178
TWIN FALLS ID 83303-5178

Re: Snake River Basin Adjudication (SRBA)
Water Rights # - Please See Attached List
Change of Address

Dear Water Right Holders:

IDWR has been notified the address presently in our records is incorrect. 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. Future notices related to your water rights can be sent only to the address on your water right or as otherwise changed by you.

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 and list any other water rights you may have before returning this letter by September 17, 1999. 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.

If there has been a change in ownership of the property connected with the water rights referenced above, please write down the name and address of the new owner(s) so we can send them a form to make this required change to the water right record.

Sincerely,

Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region

#####

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

Claimant Signature

(208) 734-0004
Telephone No.

AJ5811NP

SELECTION FILE: MCFARLAND

IDAHO DEPARTMENT OF WATER RESOURCES
SELECTION FILE CONTENTS

DATE: 08/20/99
TIME: 15:18:04
PAGE: 1

in fiche
McFarlands

Blank = McFarlands
E = new drawing, McFarlands

~~36-02550~~	36-02589	36-02667	36-02671D	36-07157B	36-07367D	36-07381D	36-07480E	36-07480F	36-11140
36-15056	36-15057	37-12903	37-12904	37-12905	37-12907	37-12911	37-12912	45-11913	45-11914
A37-02687	A37-07419A	A37-07420	A37-07435	A37-07440	A37-07639	A37-12906	A37-12908	A37-12910	A45-02550
A45-02551A	A45-07290	R36-02524	R36-07445D						

TOTAL RECORDS IN SELECTION FILE: 34

(blank)

X = changed
X = placed

per Jackson, Rite belongs
is correct. Rite belongs
to McFarlands not Ambrose

decree - CE - W.A.

McFarlands 208/734-0004