

11/14/2006
RECEIVED
DEC 07 2006
DEPARTMENT OF
WATER RESOURCES

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: December 8, 2006

Water right number: 67-7170

SANDRA K AMBROSE
2066 HWY 95
COUNCIL ID 83612
Telephone Number: (208)253-6860

KIRT M AMBROSE
2066 HWY 95
COUNCIL ID 83612
Telephone Number: (208)253-6860

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:

X I AGREE with this proposed recommendation: no changes need to be made.

DATE: 12-5-06

SIGNATURE:

Sandra K. Ambrose

Please print your name:

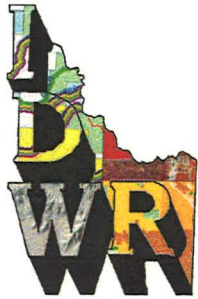
Sandra K. Ambrose

IDWR Regional Office, 322 E Front St
PO Box 83720, Boise, ID 83720-0098, 2082874800

SCANNED
DEC 08 2006

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

EXPLANATORY MATERIAL: BASIS OF CLAIM - License



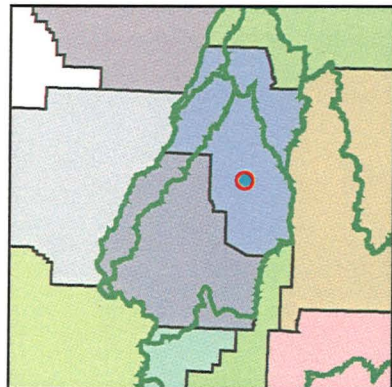
Idaho Department of Water Resources

SRBA Recommendation:

67-7170

Legend

-  Point of Diversion
-  Place of Use
-  Townships
-  PLS Sections
-  Quarter Quarters



Adams County
IDWR Basin 67



0 0.1 0.2 Miles

Prepared by M. Mount
On Thursday, September 28, 2006
1987/88 Aerial Photography

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: **A67-07170**
Date Received: 1/ 8/1990
Receipt No: W007448
Received By: _____

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

1. Name: KIRT M AMBROSE 208-253-6860
Address: HC 62 BOX 1565
COUNCIL ID 83612

OR
Name: SANDRA K AMBROSE 208-253-6860
Address: HC 62 BOX 1565
COUNCIL ID 83612

2. Date of Priority: SEP 18, 1973

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
16N	01W	11	SW	NW			ADAMS

5. Description of diverting works:
73' WELL, 6" CASING, 1/2 HP PUMP & PIPELINE

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/01	10/01	0.020		6.00
DOMESTIC	01/01	12/31	0.040		0.60

7. Total Quantity Appropriated is:
0.060 C.F.S. (and/or) 6.60 A.F.A.

8. Total consumptive use is 3.0 Acre Feet Per Annum.

9. Non-irrigation uses:
DOMESTIC, 1 HOME W/LAWN & GARDEN

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
16N	01W	11	SW	NW		IRR	2.0
Section Acres							2.0
Total Acres							2.0

11. Place of use in counties: ADAMS

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

13. Other Water Rights Used:
67-07257

14. Remarks:
AC. IRR. = 1.5.

15. Basis of Claim: LICENSE

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)
) SS.
County of _____)

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 A 67-07170Date Received 1-8-90Receipt Number 2007448

RECEIVED
JAN 08 1990

NOTICE OF CLAIM
TO A

WATER RIGHT

ACQUIRED UNDER STATE LAW

Department of Water Resources
Western Regional Office

Please type or print clearly

1. Name of Claimant (s) AMBROSE, KIRT M. & SANDRA K. Phone (208) 253-6860

Mailing Address HC 62, Box 1565, COVING, ID Zip 83612

2. Date of Priority (Only one (1) per claim) 09/18/1973

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

4. a. Location of existing point of diversion is: Township 16N Range 01W Section 11,
_____ 1/4 of SW 1/4 of NW 1/4, Govt. Lot, _____ B.M., County of ADAMS

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.

DRILLED WELL, 73' DEPTH, 6", 1/2 H.P. PUMP & PIPELINE

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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 0.04 or _____

For IRRIGATION purposes from 04/01 to 10/01 amount 0.02 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.06 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 3.0 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) DOMESTIC, 1 HOUSEHOLD, LAWN, & GARDEN, DOMESTIC STOCK.

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	
16N	1W	11							2.0										2.0

Total number of acres irrigated 2.0

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

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.
67-7257 CLAIMED. or None ()

14. Remarks:

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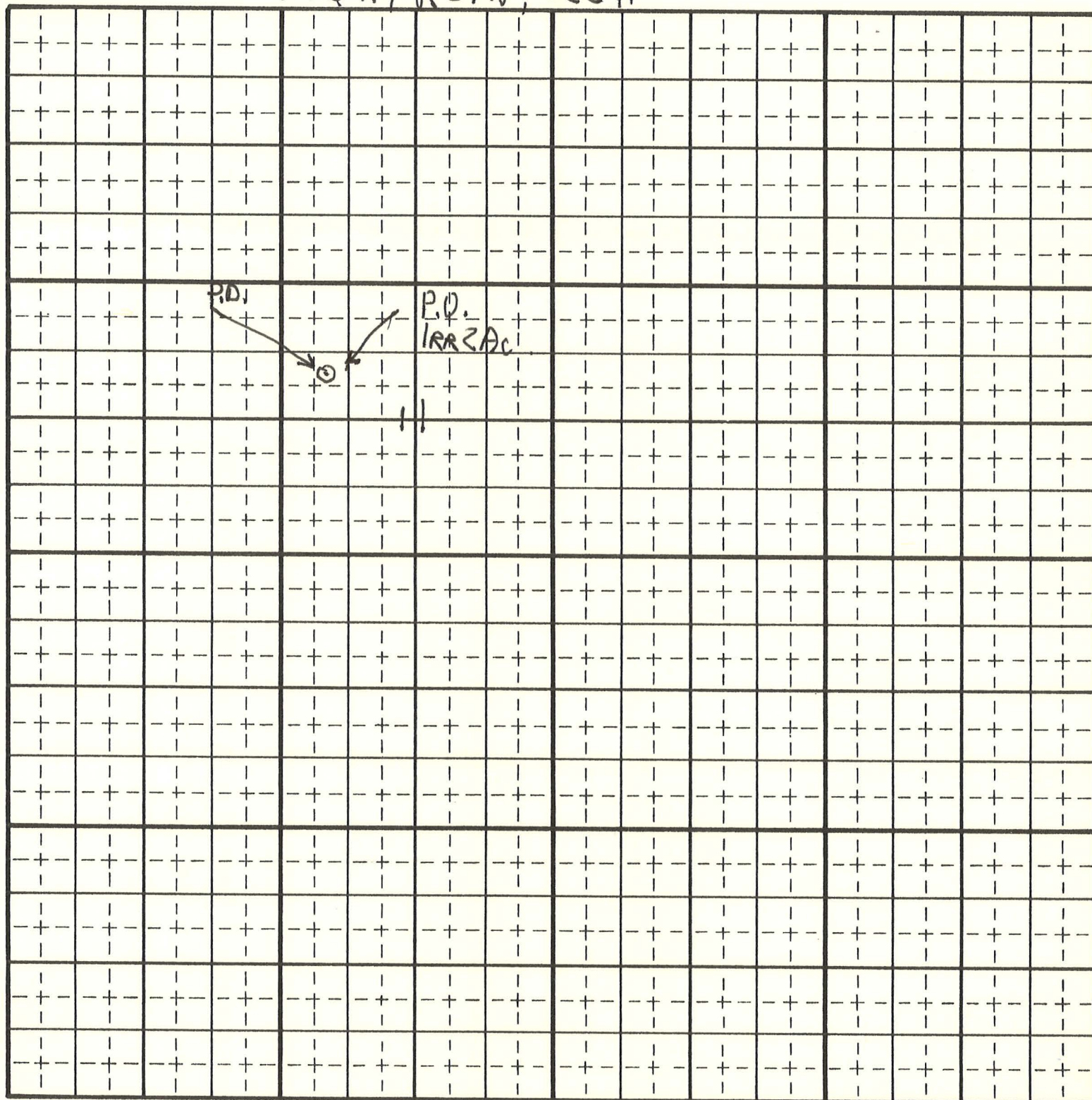
Last Name AMBROSE Ident No. AG7-07170

Copies: White -State, Yellow-Claimant

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile

T16N, R01W, Sec 11



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Last Name AMBRASE

Ident No. A67-07170

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 67-07170
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 X
wish to receive and pay a small annual fee for monthly copies of the docket sheet.
Number of attachments 0

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

Signature of Claimant (s) x Sandia K. Ambrose Date 12-4-89

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 _____)
County of ADAMS) SS.

Subscribed and sworn (or affirmed) before me this 4th day of DECEMBER 19 89

SEAL

Notary Public

Residing at

My Commission Expires

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 _____

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Last Name AMBROSE Ident. Number 67-07170

Copies White-State, Yellow-Claimant

Water Right Number - 67-07170

Prefix Translation: WATER RIGHT

Old (D) Number -

+ - - - - Last Name - - - - + + - First Name - - + + - - - - - Address - - - - - +

*** C - CURRENT OWNER ***

IDOHL

ELAINE M.

1 - STAR ROUTE

2 -

3 -

City- COUNCIL

State- ID Zip-

Phone -

+ - - Priority Date - - + + - - Region - - - + + - - Stage - - - + + - - Status - - - - +

09/18/1973

14 WESTERN

L - LICENSE

+ - - - - Source - - - - - + + - - - - Tributary - - - - - +

GROUNDWATER

+ - - - - Point of Diversion - - - - - +

Twn Rng Sec Tract Lot RFlg County Diversion Name Diversion Rate Diversion No.

16N 01W 11 SW NW (3) ADAMS

+ - - - - Water Use - - - - - +

Code Description Period From Period To Diversion Rate Diversion Volume

01 - IRRIGATION

04/01

10/01

0.020

6.00

43 - DOMESTIC

01/01

12/31

0.040

0.60

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Div. Capacity - +

0.060

6.60

+ - - - - Place of Use - - - - - +

Twn	Rng	Sec	Tract	Lot	Acres	Code	Description	County
16N	01W	11	SW NW		2.0	01	IRRIGATION	(3) ADAMS

Total Acres: 2.0

+ - - Diversion Means -

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use -

+ - - - - Remarks - - - - - +

AC. IRR. = 1.5.

+ - - - - Old Water Right Numbers - - - - - +

No Old Water Right Numbers found.

+ - - - - Conditions of Approval - - - - - +

No Conditions of Approval found.

+ - - - - Decree Plaintiff - - - +

+ - - - - Decree Defendant - - - +

+ - Decree Date - +

00/00/0000

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Proof Due Date	- 00/00/0000	Field Exam Made	- 00/00/0000	Field Exam Fee	-
Approved/Denied	- 00/00/0000	Tested Date	- 00/00/0000	Swan Falls	-
Proof Made Date	- 00/00/0000	Hearing Date	- 00/00/0000	Temporary Right	- P
Exam to S.O. Date	- 00/00/0000	Verified Date	- 06/03/1985	DLE/Carey Act	-
Order Show Cause	- 00/00/0000	Receipt Number	-	Water District	-
Licensed Date	- 02/05/1979	Appl Received	- 00/00/0000	Transfer/Amended	-
Decree Date	- 00/00/0000	Presumption Flag	-		

KIRT'S REPAIR
HC 62 BOX 1565
COUNCIL, IDAHO 83612

POOR ORIGINAL



Water Resources
2135 Airport way
Boise, ID 83705

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OCT 23 1996

ADJUDICATION CLAIM REVIEW CHECKLIST

12-1-92

CLAIMANT'S NAME

Ambrose, Kurt & Sandra

CLAIM IDENT. NO.

AL67-07170

DATE RECEIVED

1-8-90

RECEIPT #

2007448

FEE PAID

\$52.00

FEE REQ'D

\$52.00

YES

NO

Require Info?

1. Is the name and address complete with zip code? X *
2. Is a priority date entered? X *
- Is the priority date acceptable in view of mandatory filing dates? X *
- See Adjudication Memos #1 and #4 to determine if a Permit is required.
3. (a) Is a source entered? X *
- (b) Is a tributary to entered? (if required) N/A X
4. Is the legal description of the p.d. sufficient? X *
5. Is there a description of the diverting works? X
6. Are the water uses appropriate for the form? X *
- The short form is limited to D/S uses. Other uses must be filed on the long form. Note: If stockwater stor. or instream stockwater are filed on the short form & all items complete, do not return claim.
- Is the period of use included? X
- Is a quantity claimed for each use? X *
7. Is a total quantity claimed entered? X
8. If required is a consumptive use entered? N/A
- Is the consumptive use correct? N/A
9. Are the non-irrigation uses listed showing # of homes, hd. of stock? X *
- If multiple domestic, is single ownership indicated?
10. Is (are) the place(s) of use and purpose(s) indicated? X *
11. Is (are) the county(ies) entered? X
12. Is the ownership of p.u. checked? X
13. Are other water rights listed or "none" indicated? X
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 X
15. Is the basis of the claim indicated? X
16. If the basis of claim is shown as license, permit, or decree is the existing water right no. listed? N/A X
- If yes, compare claim w/existing right and attach proof report noting any differences in comments.
- If no, was water right no. found? *
17. If the basis of claim is shown as beneficial use, or not marked, are there existing water rights shown in our records using the legal description or name on the claim? N/A X
- (If yes, attach a proof report & complete number change)
- NOTE: If the claim is for dom/stock this check is not as necessary unless it is located within an area where dom/stock rights were decreed.
18. If the claimant requested a monthly docket sheet, was the fee paid? N/A X
19. Is the claim signed by the claimant, and is the signature appropriate? X *
20. Has the claim been signed, sealed, and dated by a notary? X *
21. Was this claim filed on time? X *
- (Check ML3 for date mailed-not all were mailed on the planned date)
- If no, was an extension of time filed & approved? *
22. Is the fee enclosed correct? Exempt *

MICROFILMED

OCT 23 1996

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

License of Water Right No. 67-7170 Priority Sept. 18, 1973 Amount 0.06 cfs

THIS IS TO CERTIFY, that ELAINE M. IDOHL
of Council, Idaho, has complied with the terms and conditions of Permit
No. 67-7170 issued pursuant to Application for Permit dated September 18, 1973,
and has submitted proof to the Department of Water Resources on August 15, 1975,
that he has applied water to a beneficial use; an examination by the Department indicates that the works have a
capacity for the diversion of 0.06 cfs of water from a ground water source,
tributary to _____, and that the permit holder has applied to a beneficial use and
established a right to use water as follows:

Beneficial Use	Period of Use	Rate of Diversion	Annual Volume
<u>Domestic</u>	from <u>Jan. 1</u> to <u>Dec. 31</u>	at <u>0.04</u> cfs and	<u>0.6 acre feet</u>
<u>Irrigation</u>	from <u>April 1</u> to <u>Oct. 1</u>	at <u>0.02</u> cfs and	<u>6.0 acre feet</u>
	from _____ to _____	at _____ cfs and	

(both dates inclusive)

Subject, however, to the condition that no more than 0.06 cfs of water be diverted at any one time, and
that the amount of water so diverted and to which such right is entitled and confirmed is for the purpose
aforementioned and is limited to the amount which can actually be beneficially used and shall not exceed
6.6 acre feet per year, said waters to be diverted within the SW $\frac{1}{4}$ NW $\frac{1}{4}$ of Sec. 11,
Twp. 16 N, Rge. 1 W, B. M. in the County of Adams

Description and location of place of use:

Twp.	Range	Sec.	NE $\frac{1}{4}$				NW $\frac{1}{4}$				SW $\frac{1}{4}$				SE $\frac{1}{4}$				Totals
			NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	
16 N	1 W	11						X											1 $\frac{1}{2}$

Total number of acres irrigated 1 $\frac{1}{2}$

NOTE: Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho Law. This right may be forfeited by five years of non-use.

The right to the use of the water hereby confirmed is restricted and appurtenant to the lands or place of use herein described, as provided by the laws of Idaho.

Witness the seal and signature of the Director, affixed at Boise, Idaho, this 6 day of
October, 19 75.

Director

67-7170

67-7257

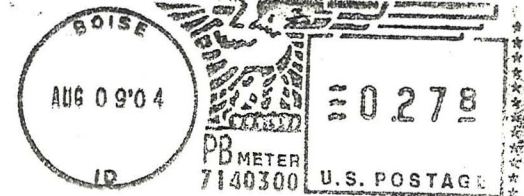
Re Conds Modified
8-13-04
/s/

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

~~Return Service Requested~~

ADDRESS SERVICE
REQUESTED

PRESORTED
FIRST CLASS



KIRT M AMBROSE

SANDRA K AMBROSE
HC 62 BOX 1565
COUNCIL ID 83612

2066 Hwy. 95
COUNCIL ID 83612

SCANNED
AUG 13 2004