

11/03/2006

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

RIGHT NUMBER: 67-7223

NAME AND ADDRESS: BEULAH B CLELLAND
PO BOX 288
COUNCIL ID 83612

ANDY K CLELLAND
PO BOX 288
COUNCIL ID 83612

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS
1.200 AFY

PRIORITY DATE: 08/22/1974

POINT OF DIVERSION:

T16N R01W S15 SWSE Within ADAMS County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
DOMESTIC	1/01 12/31	0.040 CFS 1.20 AFY
Domestic use is for 1 home.		

PLACE OF USE: DOMESTIC in ADAMS County

T16N R01W S15 SWSE

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 - License

WATER RIGHT LICENSE

THIS IS TO CERTIFY, that ANDY & BEULAH CLELLAND

Beneficial Use Period of Use Rate of Diversion Annual Volume

Domestic from January 1 to December 31 at 04 cfs and 1.2 acre feet

from _____ cfs and _____

from _____ at _____ cfs and _____

(four dates inclusive)

Description and location of place of use:

Total number of acres irrigated _____

Witness the seal and signature of the Director, affixed at Boise, Idaho, this 23 day of July, 19 80.

Director

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State of Idaho
DEPARTMENT OF WATER RESOURCES
FIELD REPORT

67-1223
Permit No.

CONTACT WITH PERMIT HOLDER

	DATE	INITIALS	REMARKS
☐ Appointment letter mailed:			
☐ Telephone call made: (List Telephone No. used)			
☐ Appointment scheduled for: (Date, time, location)			

EXAMINATION

Date 6/6/80 Accompanied by _____ Total Q measured .04
 If source is surface water, estimate total flow of source _____
 Methods of measurement calc est. Meets Permit requirements? yes

Measurement calculations:

Standard amount for 1 domestic

WELL/DIVERSION* NO.	HP	MOTOR MAKE	MOTOR SERIAL NO.	PUMP MAKE	PUMP SERIAL NO.	MEASURING DEVICE TYPE	CONDITION OF MEAS. DEV.	REMARKS
	1							

System Description 1 HP pump - 115 ft deep - 8" casing

*Code with map on reverse side. Disregard code if only one.

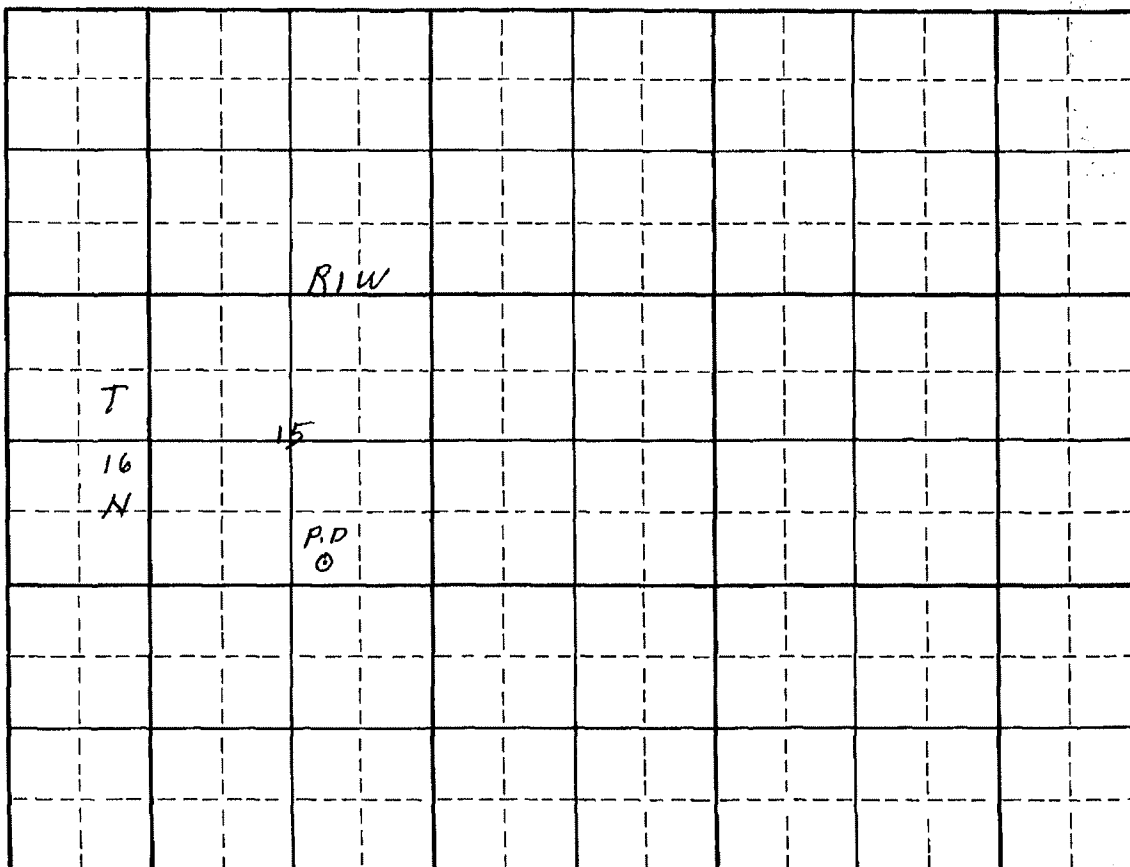
RECOMMENDED AMOUNTS	Irrigation requirement =		AFA/Acre	
USE	Q (cfs)	V (afa)	FROM	TO
<u>Domestic</u>	<u>.04</u>	<u>1.2</u>	<u>1/1</u>	<u>12/31</u>
Total	<u>.04</u>	<u>1.2</u>	<u>1/1</u>	<u>12/31</u>

Remarks _____

*Permit in John 7680r Ester R. Stewart - assigned
 to Andy & Beulah Clelland. according to telcos
 with Jim Johnson 6/25/80*

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MAP (Attach Aerial Photo)



SCHEMATIC DIAGRAM OF SYSTEM

(Include distance from pump to measuring device, if applicable.)

Point(s) of diversion: SWSE Sec 15 T16N R1W

Place(s) of Use

TWP.	RGE.	SEC.	NE¼				NW¼				SW¼				SE¼				TOTALS
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
16N	1W	15															X		

Recommended Amendments:

- ☐ Change P.D. as reflected above
☐ Change P.U. as reflected above

- ☐ Add P.D. as reflected above
☐ Add P.U. as reflected above

☐ None

☒ Other

Examiner's Signature Joh K Noyes

Checked by D.

Approved by RH

Date 6/25/80

Date 7/8/80

Date 7/10/80

State of Idaho
Department of Water Resources
ASSIGNMENT OF PERMIT

I, John H. Stover &/or Esther hereby assign to Andy & Beulah Clelland
R. Stover
of P. O. Box 288, Council, Idaho 83612
Address

CHECK ONE

☒ All my right, title, and interest in and to Permit No. 67-7223
to appropriate the public waters of the State of Idaho.

☐ The following described portion of my right, title, and interest in and to Permit
No. _____ to appropriate the public waters of the State of Idaho.

(Describe that portion of the permit being assigned by listing the acreage within
each 40 acre subdivision, the point of diversion and the amount of water in cubic
feet per second for direct diversion, or acre feet for storage)

Made this 13 day of December, 19 74.

John H. Stover
Permit Holder

Esther R. Stover
Spouse of Permit Holder

State of Idaho)
County of Adams) ss.

On this 19 day of December, 19 74, personally
appeared before me the signer(s) of the above instrument, who duly acknowledged to me
that he (she) (they) executed the same.

seal

Rue Braun
Notary Public residing at
Council, Idaho 83612

My commission expires:
June 22, 1976

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Identification No. _____

Application No. 67-7223

STATE OF IDAHO
DEPARTMENT OF WATER ADMINISTRATION

APPLICATION FOR PERMIT

To Appropriation the Public Waters of the State of Idaho
(TYPE OR PRINT IN INK)

APPROVED

1. Name of applicant John H. &/or Esther R. Stover
post office address Box 604 Council, Idaho 83612
2. Source of water supply Ground water which is a tributary of _____
3. a. Location of point of diversion is SW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 15 Township 16 N
Range 1 W B.M. Adams County; additional points of diversion if any: _____

b. If water is not consumed, it will be discharged into _____ at a point in _____ $\frac{1}{4}$
of _____ $\frac{1}{4}$ of Section _____ Township _____ Range _____ B.M. _____
4. Water will be used for the following purposes:
Amount .04 for Domestic purpose from Jan. 1 to Dec. 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purpose from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purpose from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity to be appropriated:
a. .04 cubic feet per second and/or
b. _____ acre feet per annum.
6. Proposed diverting works:
a. Description of ditches, flumes, pumps, headgates, etc. _____
Well, pump and pressure system already completed in 1963.
June

b. Height of storage dam _____ feet, active reservoir capacity _____ acre feet; total reservoir
capacity _____ acre feet, materials used in storage dam: _____
Period of year during which storage will occur _____ to _____ inclusive.
(Mo. Day) (Mo. Day)
c. Proposed well diameter is _____ inches; proposed depth of well is _____ feet.
7. a. Time required for the completion of the works and application of the water to the proposed beneficial use
is 5 years. eeb
b. Estimated construction cost is \$ _____.
8. Description of proposed uses:
a. If water is **not** for irrigation:
(1) Give the place of use of water: SW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 15 Township 16N
Range 1W B.M. _____
(2) Amount of power to be generated: _____ hp under _____ feet of head.
(3) List number of each kind of livestock to be watered _____

(4) Name of municipality to be served _____, or number of families to be
supplied with domestic water one.
(5) If water is to be used for other purposes describe: _____

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b. If water is for irrigation, indicate acreage in each subdivision in the tabulation below:

TWP.	RANGE	SEC.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				TOTALS
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	

Total number of acres to be irrigated _____

c. Describe any other water rights used for the same purposes as described above. _____

9. a. Who owns the property at the point of diversion Applicant

b. Who owns the land to be irrigated or place of use Applicant eeb

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing _____

10. Remarks This well is located by house

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

and range number.

T 16 N R 1 W

NW NE

SW SE

15

Scale: 2 inches equal 1 mile

BE IT KNOWN that the undersigned hereby makes application for permit to appropriate the public waters of the State of Idaho as herein set forth.

John W. Stover
(Applicant)
Esther P. Stover

Proposed Priority 8-22-1974

Received by TA Date 8-22-74 Time 8:45 AM
Preliminary check by CAB fee \$ 10.00
Receipted by SW Date 8-22-74 # 15202
Publication prepared by CA Date 8-23-74
Published in Adams County Leader
Publication dates Aug 29 & Sept 5
Publication approved CA Date 9-9-74
Priority reduced to _____ Reason _____

Protests filed by: _____

Copies of protests forwarded by _____
Hearing held by _____ Date _____
Recommended for approval denial by CAB DF

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER ADMINISTRATION

This is to certify that I have examined Application for Permit to appropriate the public waters of the State of Idaho No. 67-7223, and said application is hereby APPROVED.

1. Approval of said application is subject to the following limitations and conditions:

- a. SUBJECT TO ALL PRIOR WATER RIGHTS.
- b. Proof of construction of works and application of water to beneficial use shall be submitted on or before September 1, 19 79.
- c. Other: _____

2. Denial of said application is for the following reasons: _____

Witness my hand this 26 day of September, 19 74.


Director

IDAHO DEPARTMENT OF WATER RESOURCES
Adjudication Recommendation Report 67-7223 V1

WATER RIGHT NUMBER: 67-7223 V1

<u>Owner Type</u>	<u>Name and Address</u>
Original Owner	JOHN H STOVER PO BOX 604 COUNCIL, ID 83612 (208)253-4352
Current Owner	BEULAH B CLELLAND PO BOX 288 COUNCIL, ID 83612 (208)253-4565
Current Owner	ANDY K CLELLAND PO BOX 288 COUNCIL, ID 83612 (208)253-4565
Original Owner	ESTHER R STOVER PO BOX 604 COUNCIL, ID 83612 (208)253-4352

Priority Date: 08/22/1974

Basis: License

Status:

Source

GROUND WATER

Beneficial Use

DOMESTIC

Location of Point(s) of Diversion

GROUND WATER NW/4SW1/4SE1/4 Sec. 15, Twp 16N, Rge 01W, B.M.
ADAMS County

Place of Use

DOMESTIC

Twp	Rge	Sec	NE	NW	SW	SE	Totals
16N	01W	15					

Conditions of Approval:

Remarks:

IDAHO DEPARTMENT OF WATER RESOURCES
Adjudication Recommendation Report 67-7223 V1

Comments:

Dates and Other Information:

Decreed Date:
Enlargement Use Priority Date:
Enlargement Statute Priority Date:
Defendant:
Plaintiff:
Civil Case Number:
Judicial District:
Notice of Error Flag:
State or Federal: S
Owner Name Connector: OR
Water District Number:
Generic Max Rate Per Acre:
Generic Max Volume Per Acre:
Swan Falls Trust or Nontrust:
Swan Falls Dismissed:
DLE Act Number:
Carey Act Number:
Mitigation Plan: False

Combined Use Limits:

Element Reviewed/Verified Dates:

Element	Last Reviewed Date	Reviewer	Last Verified Date	Verifier	Status
Priority Date	5/20/2004 9:10:40 AM	segbert			
POD	5/20/2004 9:11:27 AM	segbert			
Source	5/20/2004 9:20:23 AM	segbert			
POU	5/20/2004 9:20:37 AM	segbert			
Use	5/20/2004 9:21:27 AM	segbert			
Season	5/20/2004 9:21:50 AM	segbert			
Quantity	5/20/2004 9:22:22 AM	segbert			

Verification Log:

Element	Date Time Stamp	Reviewer	Log text
POD	5/20/2004 9:11:27 AM	segbert	(Yes) 1. Is the basis of this claim a Decree or License? (Yes) 4. Does the Decree or License have a POD? (Yes) 5. Can the claimed POD be verified using the water right file?
Priority Date	5/20/2004 9:10:41 AM	segbert	(No) 1. Should this water use have been included in a later court decree of the water rights from this source? (Yes) 4. Is the basis of claim decree or license? (Yes) 5. Does the decree or license have a Priority Date? (Yes) 6. Did the Claimant claim the decreed or licensed Priority Date? (Yes) 15. Is the basis of claim coded correctly?

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: **A67-07223**
Date Received: 12/11/1989
Receipt No: W007050
Received By: _____

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

1. Name: ANDY K CLELLAND 208-253-4565
Address: PO BOX 288
COUNCIL ID 83612
OR
Name: BEULAH B CLELLAND 208-253-4565
Address: PO BOX 288
COUNCIL ID 83612

2. Date of Priority: AUG 22, 1974

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
16N	01W	15	NW	SW	SE		ADAMS

5. Description of diverting works:
120' WELL, 6" CASING, PUMP & PIPELINE TO HOUSE, LAWN & GARDEN

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		1.20

7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) 1.20 A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

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

SCANNED
MAY 10 2004

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
16N	01W	15	SW	SE		DOMEST	

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:
NONE

14. Remarks:

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

CIVIL CASE NUMBER: 39576

Identification No. AB7-07223Date Received 12-11-89Receipt Number W007050NOTICE 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.

RECEIVED

DEC 11 1989

Department of Water Resources
Western Regional Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) CLELLAND, ANDY K & BEULAH B. Phone (208) 253-4365
Mailing Address P.O. Box 288, Council, ID Zip 836122. Date of Priority (Only one per claim) 08/22/1974 Month/Day/Year3. Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
which is tributary to (b) _____ Name or kind of source4. Location of point of diversion is: Township 16N Range 1W
Section 15, NW 1/4 of SW 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of ADAMS

Additional points of diversion if any: _____

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. DRILLED WELL, 120' DEPTH, 6" CASING, PUMP & PIPELINE TO HOUSE, LAWN, GARDEN.

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

For DOMESTIC purposes from 01/01 ^{Month/Day} to 12/31 ^{Month/Day} amount 0.04 ^(cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____7. Total quantity claimed 0.04 (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) DOMESTIC, 1 HOUSEHOLD, LAWN, & GARDEN.

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10. Place of use is: Township: 16N Range 01W
Section 15, SW 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? 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.
(X) None or _____

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 67-7223

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) X Andy K Clelland Date 12-7-1989

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 _____ Date _____

Title and Organization _____

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

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 7th day of Dec 1989

SEAL

Notary Public Shirley E. Sully

Residing at BOISE, ID

My Commission Expires 11/08/1994

Last Name CLELLAND Ident No. A67-07223

Copies: White-State, Yellow-Claimant

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Water Right Number - 67-07223

Prefix Translation: WATER RIGHT

Old (D) Number -

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

*** C - CURRENT OWNER ***

CLELLAND

ANDY

1 - P.O. BOX 288

2 -

3 -

City- COUNCIL

State- ID Zip- 83612

Phone -

CLELLAND

BEULAH

1 - P.O. BOX 288

2 -

3 -

City- COUNCIL

State- ID Zip- 83612

Phone -

*** O - ORIGINAL OWNER ***

STOVER

JOHN H.

1 -

2 -

3 -

City-

State- Zip-

Phone -

STOVER

ESTHER R.

1 -

2 -

3 -

City-

State- Zip-

Phone -

+ - - Priority Date - - +
08/22/1974

+ - - Region - - - +
14 WESTERN

+ - - Stage - - - +
L - LICENSE

+ - - Status - - - +

+ - - Source - - - - - +
GROUNDWATER

+ - - Tributary - - - - - +

+ - - Point of Diversion - - - - - +
TwN Rng Sec Tract Lot RFlg County Diversion Name Diversion Rate Diversion No.

16N 01W 15 SW SE (3) ADAMS

+ - - Water Use - - - - - +
Code Description Period From Period To Diversion Rate Diversion Volume

43 - DOMESTIC 01/01 12/31 0.040 1.20

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Div. Capacity - +
0.040 1.20

+ - - Place of Use - - - - - +
TwN Rng Sec Tract Lot Acres Code Description County

16N 01W 15 SW SE 43 DOMESTIC (3) ADAMS

+ - - Diversion Means - WELL AND PRESSURE PUMP.

+ - - Non-Irrigation Use -

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Water right number - 67-07223

Prefix Translation: WATER RIGHT

+ - - Other Rights for Same Use -

+ - - - - - Remarks - - - - -
No Remarks found.

+ - - - - - 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

+ - - - - - Comments - - - - -
No Comments Found

+ - - Audit Fields - 06/18/85 05/01/88 CONVERT

+ - - - - - Water Rights Dates and Flags Area - - - - -

Proof Due Date - 09/01/1979	Field Exam Made - 00/00/0000	Field Exam Fee -
Approved/Denied - 09/26/1974	Protested 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 - 06/18/1985	DLE/Carey Act -
Order Show Cause - 00/00/0000	Receipt Number -	Water District -
Licensed Date - 04/12/1982	Appl Received - 00/00/0000	Transfer/Amended -
Decree Date - 00/00/0000	Presumption Flag -	

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ADJUDICATION CLAIM REVIEW CHECKLIST

12-1-92

CLAIMANT'S NAME

Clelland, Andy or Bousak

CLAIM IDENT. NO.

AL67-07223DATE RECEIVED 12-11-89RECEIPT # 2007050FEE PAID \$ 25.00FEE REQ'D \$ 25.00

	YES	NO	Require Info?
1. Is the name and address complete with zip code?	<u>X</u>	<u> </u>	*
2. Is a priority date entered?	<u>X</u>	<u> </u>	*
Is the priority date acceptable in view of mandatory filing dates? <u>X</u> *			
See Adjudication Memos #1 and #4 to determine if a Permit is required.			
3. (a) Is a source entered?	<u>X</u>	<u> </u>	*
(b) Is a tributary to entered? (if required) N/A <u>X</u>	<u> </u>	<u> </u>	
4. Is the legal description of the p.d. sufficient?	<u>X</u>	<u> </u>	*
5. Is there a description of the diverting works?	<u>X</u>	<u> </u>	
6. Are the water uses appropriate for the form?	<u>X</u>	<u> </u>	*
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?	<u>X</u>	<u> </u>	
Is a quantity claimed for each use?	<u>X</u>	<u> </u>	*
7. Is a total quantity claimed entered?	<u>X</u>	<u> </u>	
8. If required is a consumptive use entered? N/A <u>X</u>	<u> </u>	<u> </u>	
Is the consumptive use correct? N/A <u>X</u>	<u> </u>	<u> </u>	
9. Are the non-irrigation uses listed showing # of homes, hd. of stock?	<u>X</u>	<u> </u>	*
If multiple domestic, is single ownership indicated? <u> </u>			
10. Is (are) the place(s) of use and purpose(s) indicated?	<u>X</u>	<u> </u>	*
11. Is (are) the county(ies) entered?	<u>X</u>	<u> </u>	
12. Is the ownership of p.u. checked?	<u>X</u>	<u> </u>	
13. Are other water rights listed or "none" indicated?	<u>X</u>	<u> </u>	
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 <u>X</u>	<u> </u>	<u> </u>	
15. Is the basis of the claim indicated?	<u>X</u>	<u> </u>	
16. If the basis of claim is shown as license, permit, or decree is the existing water right no. listed? N/A <u>X</u>	<u> </u>	<u> </u>	
If yes, compare claim w/existing right and attach proof report noting any differences in comments.			
If no, was water right no. found?	<u> </u>	<u> </u>	*
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 <u>X</u>	<u> </u>	<u> </u>	
(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 <u>X</u>	<u> </u>	<u> </u>	
19. Is the claim signed by the claimant, and is the signature appropriate?	<u>X</u>	<u> </u>	*
20. Has the claim been signed, sealed, and dated by a notary?	<u>X</u>	<u> </u>	*
21. Was this claim filed on time?	<u>X</u>	<u> </u>	*
(Check ML3 for date mailed-not all were mailed on the planned date)			
If no, was an extension of time filed & approved?	<u> </u>	<u> </u>	*
22. Is the fee enclosed correct? Exempt <u>X</u>	<u> </u>	<u> </u>	*

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	YES	NO
23. Is this claim being rejected and returned to claimant?	—	<u>X</u>
24. Can this claim be data entered?	<u>X</u>	—
25. Was claim modified?	—	<u>X</u>
If yes, do modifications require notification to claimant?		
Note: Modifications made must be explained in comments stating where the information for any changes was found.		

Claim reviewed by: ZAD Date 3-21-94

Claim data entered by: ZAD Date 7-18-94

IF REQUIRED INFORMATION IS INCOMPLETE SEE INSTRUCTIONS TO DECIDE WHETHER THE CLAIM NEEDS TO BE RETURNED OR IF IT CAN BE MODIFIED. IF IT MUST BE RETURNED INSTRUCTIONS WILL SPECIFY WHICH FORM LETTER TO USE.

Comments: _____

UNRECORDED

SEP 1 1994