

11/14/2006

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: December 8, 2006

Water right number: 67-14511

KRISTI HAMILTON
2131 MISSMAN RD
COUNCIL ID 83612
Telephone Number: (208)253-6418

DANIEL H HAMILTON
2131 MISSMAN RD
COUNCIL ID 83612
Telephone Number: (208)253-6418

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: 11-29-06

SIGNATURE:

Kristi Hamilton

Please print your name: KRISTI HAMILTON

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

SCANNED
DEC 11 2006

11/11/2006

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

RIGHT NUMBER: 67-14511

NAME AND ADDRESS: KRISTI HAMILTON
2131 MISSMAN RD
COUNCIL ID 83612

DANIEL H HAMILTON
2131 MISSMAN RD
COUNCIL ID 83612

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS

The quantity of water under this right shall not exceed 13,000 gallons per day.

PRIORITY DATE: 12/31/1940

POINT OF DIVERSION:

T16N R01W S2 SESW Within ADAMS 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 for 1 home and up to one-half acre irrigation.		

PLACE OF USE: DOMESTIC in ADAMS County

T16N R01W S02 SESW

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

The quantity of water decreed for this water right is not a determination of historical beneficial use.

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Beneficial Use

IDAHO DEPARTMENT OF WATER RESOURCES

Adjudication Claim Report 67-14511

WATER RIGHT NUMBER: 67-14511

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	KRISTI HAMILTON 2131 MISSMAN RD COUNCIL, ID 83612 (208)253-6418
Current Owner	DANIEL H HAMILTON 2131 MISSMAN RD COUNCIL, ID 83612 (208)253-6418

Priority Date: 12/31/1940

Basis: Beneficial Use

Status: Active

<u>Source</u>	<u>Tributary</u>
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GROUND WATER

<u>Beneficial Use</u>	<u>From</u> <u>To</u>	<u>Diversion Rate</u>	<u>Annual Volume</u>
DOMESTIC	01/01 to 12/31	0.040 CFS	
	<u>Total Diversion:</u>	0.040 CFS	

Location of Point(s) of Diversion

GROUND WATER	SE1/4SW1/4	Sec. 2, Twp 16N, Rge 01W, B.M.
ADAMS County		

Place of UseDOMESTIC Within ADAMS County

T16N R01W S02 SESW

Conditions of Approval:

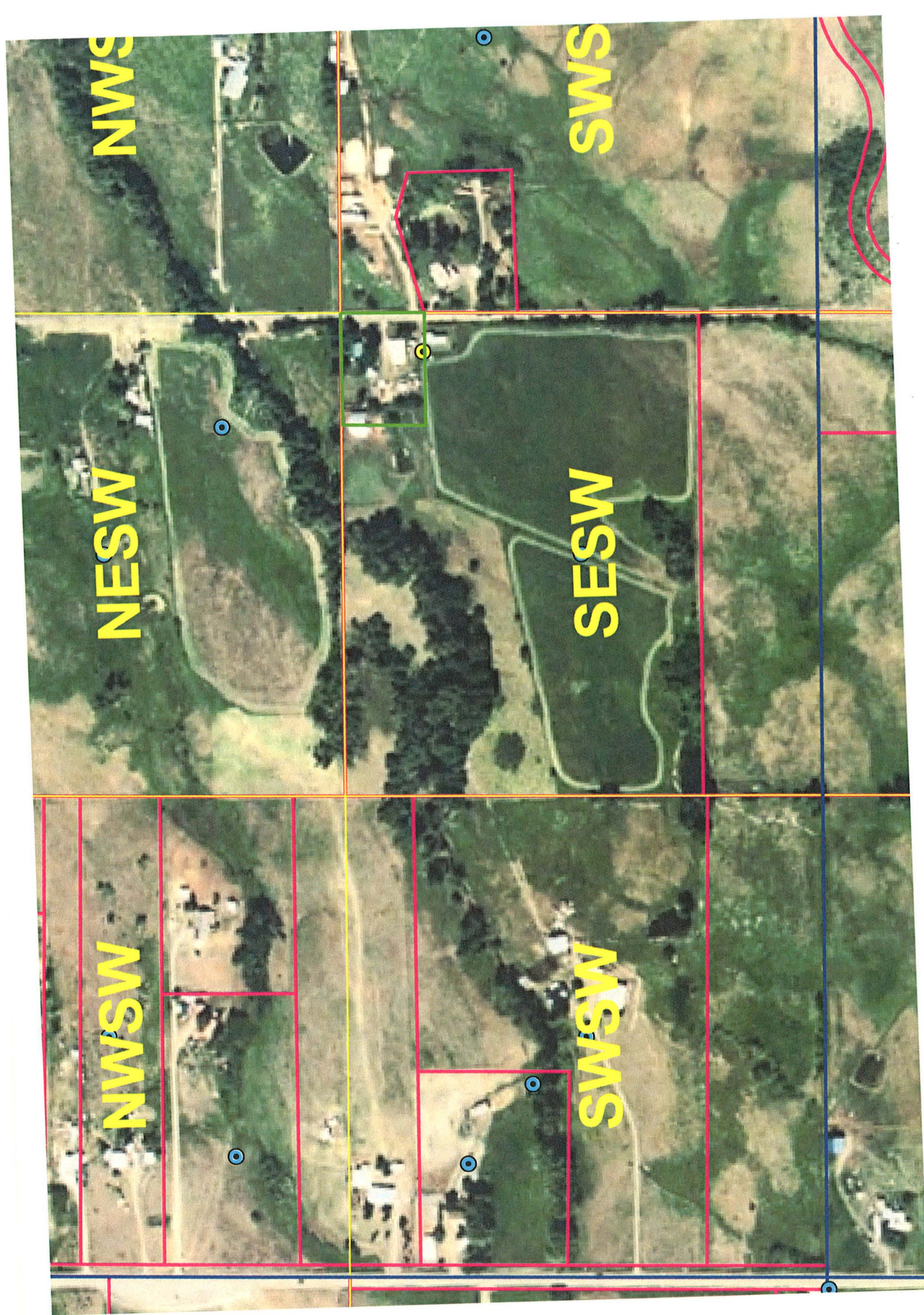
1. House was built in 1930s.

Remarks:Comments:Element Reviewed/Verified Dates:

<u>Element</u>	<u>Last Reviewed Date</u>	<u>Reviewer</u>	<u>Last Verified Date</u>	<u>Verifier</u>	<u>Status</u>
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801k Dom use is for home
 111k for dam not a det at this bldg
 113k for dam not to > 13k bpd

100k for well 100k



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 67-14511
Date Received: 1/25/2005
Receipt No: W032551
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

KRISTI HAMILTON Phone: (208)253-6418
2131 MISSMAN RD
COUNCIL ID USA 83612

DANIEL H HAMILTON Phone: (208)253-6418
2131 MISSMAN RD
COUNCIL ID USA 83612

2. Date of Priority: 12/31/1940

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 Lot	County	Type
16N	01W	2	SE	SW		ADAMS	

5. Description of diverting works:

Well, pipes to house.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
16N	01W	2	SE	SW	DOMESTIC	

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:

14. Remarks:

House was built in 1930s.

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

CIVIL CASE NUMBER: 39576

Identification No. AL 7-14511Date Received 1-25-05Receipt Number W032551

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JAN 25 2005

WATER RESOURCES
WESTERN REGION

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

- Name of Claimant (s) DANIEL H. AND/OR KRISTI HAMILTON Phone (208) 253-6418
Mailing Address 2131 MISSMAN RD COUNCIL, ID Zip 83612
- Date of Priority (Only one per claim) APPROX 1940 Month/Day/Year
- Source of water supply (Check one) (☒ Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source
- Location of point of diversion is: Township 16N Range 1W
Section 2, N 1/2 of SE 1/4 of SW 1/4, Govt. Lot _____, BM.,
County of ADAMS
Additional points of diversion if any: _____
- 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. 1 WELL HAS BEEN CAPPED. DON'T KNOW WHEN OTHER WELL WAS DRILLED OR HOW DEEP. THE PIPES GO INTO THE HOUSE.
- Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For DOMESTIC purposes from 1-1 Month/Day to 12-31 Month/Day amount .04 (cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed .04 (cfs)
- Total consumptive use claimed is de minimus
- Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) DOMESTIC - 1 HOUSEHOLD

10. Place of use is: Township: 16 N Range 1 W
Section 2, SE 1/4 of SW 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: HOUSE WAS BUILT IN 1930'S.

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 _____

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 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) [Signature] Date 1-21-05

Kristi Hamilton Date 1-21-05

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

of _____, that I have signed the foregoing

document in the space below as _____ of _____

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 21st day of January 20 2005



Notary Public Colleen M. Skilling

Residing at Indian Valley

My Commission Expires 7/1/2010

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

Receipt Details for ID W032551

Status	Adjustment Type	Version
		1

General Information:

Date Received	Date Deposited	Region	Total Amount	Payment Type
1/25/2005 12:24:11 PM	1/25/2005 1:59:23 PM	WESTERN	\$25.00	Check
Payer	HAMILTON, DANIEL/KRISTI			

Account Information:

Check #	Account #	Credit Card Name	Authorization #
4933			
Card Expiration Date	Credit Card Transaction #		

Comment Adjudication Claim Fee

Fee Detail:

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$25.00	ADJUDICATION FILING FEE	42503	0337			1155

Refund(s):

Amount	Payee	Date	Document Number
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Water Right Information:

Basin Number	Sequence Number	Split Suffix	Amount	Type
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Print Report