

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: A36-07605
Date Received: 7/22/1988
Receipt No: 5002043
Received By: ADM

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: A. N. AMBROSE 208-536-5332
Address: P.O. BOX 247
WENDELL, ID 83355

2. Date of Priority: FEB 04, 1976

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
07S	15E	35	NE	SW	SW		GOODING
08S	15E	2	NW	NE	NW	2	GOODING

5. Description of diverting works:
WELL, PUMP & SPRINKLERS.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	03/15	11/15	1.040		

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

8. Total consumptive use is 186.0 Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
07S	15E	34	NE	SE		IRR	12.0
Section Acres							12.0

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
07S	15E	35	NW SE		IRR	40.0
Section Acres						40.0
Total Acres						52.0

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; OTHER RIGHTS OUT OF SAME SYSTEM

14. Remarks:

15. Basis of Claim: LICENSE

(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.

For Individuals:

Signature of Claimant(s): Q. M. C. C. C. Date: 8-17-88
Date:

State of Idaho)
County of Gooding) SS.

Subscribed and sworn (or affirmed) before me this 17th day
of August 19 88 William
Notary Public

William Cooper
Notary Public

Residing at Wendell, Idaho
My Commission Expires 4-28-91

MICROFILMED
FEB 04 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

04-Jan-1994

RECEIVED
JAN 10 1994
Department of Water Resources
Southern Region Office

RECEIVED

JAN 05 1994

Moffatt, Thomas, Barrett Rock and Fields

LE ANNE SIMNITT
MOFFATT THOMAS BARRETT ROCK & FIELDS
911 W IDAHO STREET, SUITE 300
PO BOX 829
BOISE ID 83701-0829

RE: Copy of SRBA File(s): 36-02016, 36-02087, 36-02113, 36-02161,
36-02289B, 36-02311, 36-02412B, 36-02500,
36-02614, 36-07136, 36-07157A, 36-07163,
36-07219, 36-07304, 36-07307, 36-07324,
36-07362, 36-07452, 36-07477, 36-07561,
36-07605, 36-07606, 36-07779, 36-07832,
36-10225, 36-15169

Dear Ms. Simnitt:

Please find enclosed the copies of documents you recently requested contained in the above referenced SRBA file(s) as of this date. Please note that copies of orthophoto quad maps or NAPP photography or aerial slides which may have been used in the review of your claim(s) have not been included since they are not easily reproduced. These items are however available for your review at our office. I apologize for the confusion in your request which resulted in the delay and if I can be of any further assistance, please give me a call.

Please remit the following for the cost of the copies and postage:

\$68.63

Sincerely,

Jeanie Robertson
Records Clerk

Encl:

MICROFILMED
OCT 24 1994

RECEIPT
For Monies Paid
to the
Idaho Department of Water Resource

Receipt No: 2012472

Date: 12/10/1994
Time: 12:29:30

Received

From: MOFFATT THOMAS ET AL

Type of Payment	Program A cct	Amount
COPIES/AMBROSE CLAIMS BASIN 36		
64100	229 21 1760	66.00

Total

CHECK 114575

\$66.00

Region: SOUTHERN

Signature:

Janie Robertson

MICROFILMED

OCT 24 1994

Received 12/4/90
Southern

Edward D. Ahrens
WHITE, AHRENS, PETERSON & PERRY, P.A.
Attorneys for Personal Representative
104 Ninth Avenue South
Post Office Box 247
Nampa, Idaho 83653-0247
Telephone: (208) 466-9272
888-1482

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF GOODING
Magistrate Division

In the Matter of the Estate of	)	Case No. <u>21107</u>
A. NEAL AMBROSE,	)	LETTERS TESTAMENTARY
Deceased.	)	

The Will of A. Neal Ambrose, deceased, having been admitted to informal probate, Leona Ambrose, the person who is named personal representative therein, is hereby appointed personal representative.

WITNESS: THOMAS R. CUSHMAN, Magistrate of the District Court, County of Gooding, State of Idaho, with the seal of the Court affixed this 51 day of July, 1989.

THOMAS R. CUSHMAN
Magistrate

MICROFILMED
FEB 04 1993

STATE OF IDAHO)
) : ss
County of Gooding)

I hereby accept the duties of personal representative of the Estate of A. Neal Ambrose, and do solemnly swear that I will perform, according to law, the duties of personal representative.

Leona Ambrose
Leona Ambrose

SUBSCRIBED AND SWORN to before me this 7th day of July, 1989.

William Cooper
Notary Public for Idaho
Commission expires: 4-28-91

(SEAL)

03/12311.2

STATE OF IDAHO }
COUNTY OF GOODING }

I hereby certify that the foregoing is a true copy of the original and is on file in my office.

Dated 7-31 19 89

JOHN L. MYERS
Idaho Court Clerk

By Dorothy Schaeffer

LETTERS TESTAMENTARY-2

MICROFILMED
FEB 04 1993

CLAIM NUMBERS 36-07605

DATE 10/18/97
 AGENT JR

TRANSFER NUMBER _____
 OBJECTION FILED ☒
 TOTAL ACRES FROM RECOMMENDATION 52
 GEOGRAPHIC INFO SYSTEM 51.85

RIGHT NO				NE				NW				SW				SE			
	TNS	RNG	SEC	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE
RECOM	07S	15E	34													12			12
GIS																11.87			11.87
RECOM	07S	15E	35													40			40
GIS																39.98			39.98
RECOM																			
GIS																			
RECOM																			
GIS																			

UPDATED

POLYGON #

UPDATED

B36-DBPOU.DBF 606, 607
 B36-DBPOD.DBF 592, 593

POLYGON CREATED ON 604 () _____
 ATTRIBUTES OF B36-POU.SHP (606) 607
 ATTRIBUTES OF B36-POD.SHP (592) NESWSW-35
 (593) NWNE NW-2

polygon #606 = 11.87 Ac.
polygon # = 39.98 Ac. } 51.85 Ac

P/U CONFLICT yes () no ☒

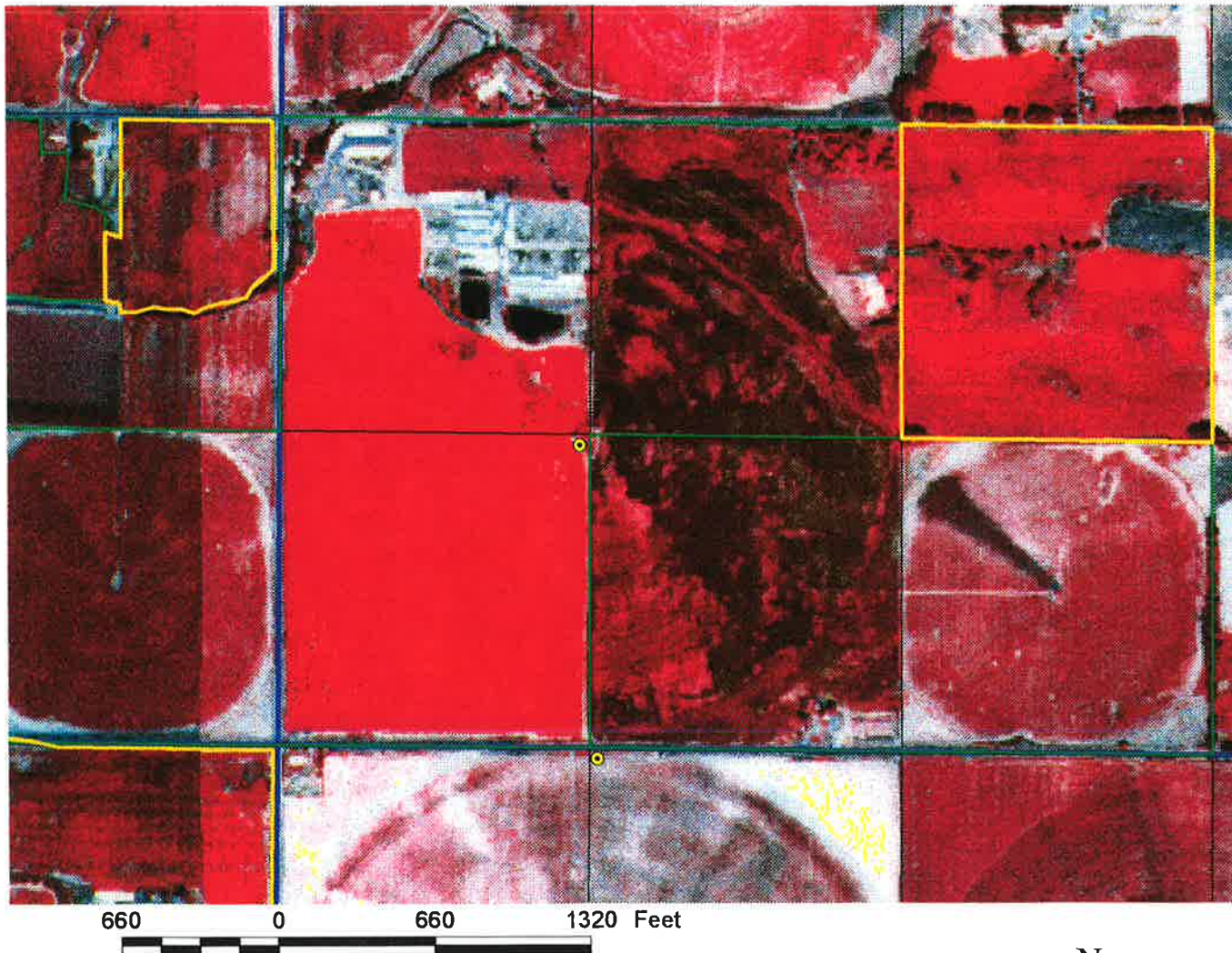
P/D CONFLICT yes () no ☒

READY FOR DECREE yes ☒ no ()

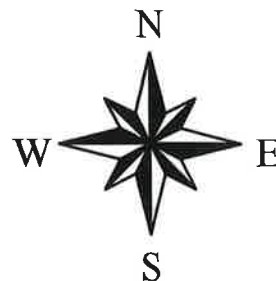
SENT FOR DECREE yes () no ()

IDAHO DEPARTMENT OF WATER RESOURCES

36-07605
A N AMBROSE



TNS 7S, RNG 15E, SEC 34 & 35



⊙ RECOMMENDED POINT OF DIVERSION

RECOMMENDED PLACE OF USE

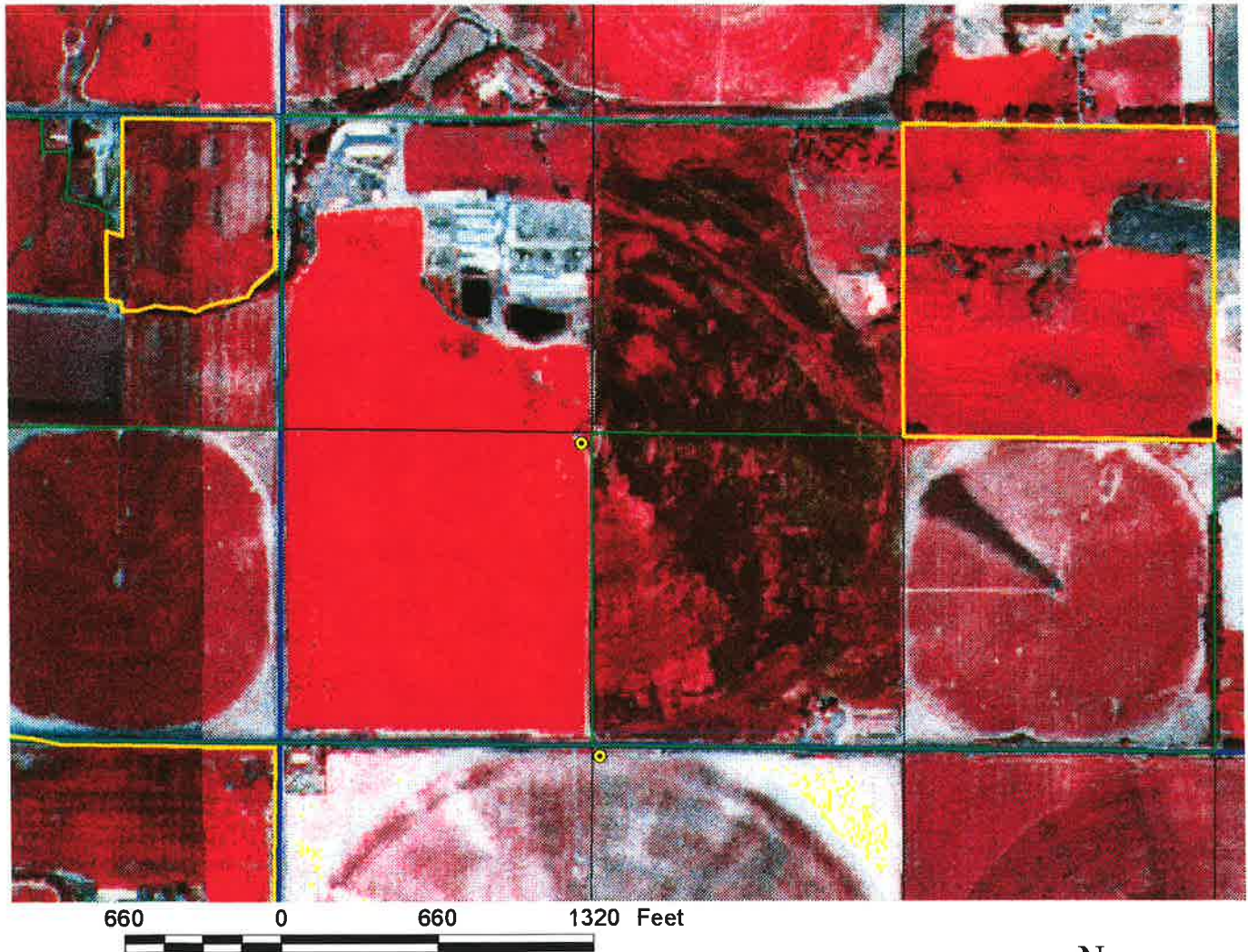
SECTION LINES

QUARTER/QUARTER LINES

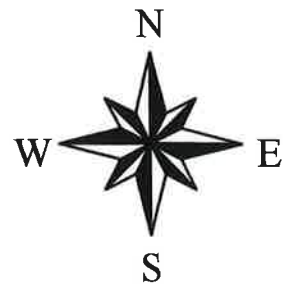
GIS PLACE OF USE PRESENTATION
1987 and/or 1988 NAPP PHOTOGRAPHY
DATA ENTRY OCTOBER 1997
BY JEANIE ROBERTSON

IDAHO DEPARTMENT OF WATER RESOURCES

36-07605
A N AMBROSE



TNS 7S, RNG 15E, SEC 34 & 35



⊙ RECOMMENDED POINT OF DIVERSION

RECOMMENDED PLACE OF USE

SECTION LINES

QUARTER/QUARTER LINES

GIS PLACE OF USE PRESENTATION
1987 and/or 1988 NAPP PHOTOGRAPHY
DATA ENTRY OCTOBER 1997
BY JEANIE ROBERTSON

"DO NOT FILM"

R PROOF

CVR

MAPS

PHOTOS

MISC

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OCT 19 1984



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
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04-Jan-1994

LE ANNE SIMNITT
MOFFATT THOMAS BARRETT ROCK & FIELDS
911 W IDAHO STREET, SUITE 300
PO BOX 829
BOISE ID 83701-0829

RE: Copy of SRBA File(s): 36-02016, 36-02087, 36-02113, 36-02161,
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36-07605, 36-07606, 36-07779, 36-07832,
36-10225, 36-15169

Dear Ms. Simnitt:

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Please remit the following for the cost of the copies and postage:

\$68.63

Sincerely,

A handwritten signature in cursive script that reads 'Jeanie'.

Jeanie Robertson
Records Clerk

Encl:

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OCT 19 1994

DIRECTOR'S REPORT CONVERSATION MEMO

1. PERSON(S) MAKING THE ENQUIRY:

Include address and phone no.

in case follow-up is needed.

telephone call recd.
01-03-1994

Ms. LeAnn Simmitt Legal Asst.
MOFFAT THOMAS et al
Box 829 Boise, ID. 945-2000
83701

2. SUBJECT OF INQUIRY:

Made call to Alan Bates on 12-21-1993 to request complete copies of 26 claim files in the name of A.N. Ambrose BASIN 36.

No further contact and no material received - firm attorney to meet with client on Friday, 01-07-1994, have copies been sent?

Contacted vault clerk - & report of request - reception has & knowledge of request

3. RESPONSE TO INQUIRY:

Vault clerk began copying claim files.

Called Simmitt to report copying was started. She requested mail out of all material as done in order to have attorney review ASAP. The same to be done the next day.

Telephone on 01-04-1994 to report status of copying and mailing.

4. IDWR STAFF AND DATE:

Print name and initial

Frank Hitchcock 01-03-1994
Frank Hitchcock (FH)

WATER RIGHT CLAIM (Nos.):

36-02016, -02087, -02113, -02161, -02215, -02311,
-02412B, -02500, -02614, -07136, -07157A, -07163, -07219, -07304,
-07307, -07324, -07362, -07452, -07477, -07561, -07605, -07606,
-07779, -07832, -10225, -15169

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OCT 19 1994

R PROOF



CVR



MAPS



PHOTOS



MISC



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FEB 04 1993

VERIFIED BY

Water Right Number - R36-07605

Prefix Translation: RESEARCH

Old (D) Number -

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

*** C - CURRENT OWNER ***

AMBROSE

A.N.

1 - P.O. BOX 247

2 -

3 -

City- WENDELL

State- ID Zip- 83355

Phone - 208-536-5332

+ - - Priority Date - - + + - - Region - - - + + - - Stage - - - + + - - Status - - - +
02/04/1976 17 SOUTHERN L - LICENSE+ - - - - Source - - - - - + + - - - - Tributary - - - - - +
GROUNDWATER+ - - - - Point of Diversion - - - - - +
Twn Rng Sec Tract Lot RFlg County

07S 15E 35 NE SW SW (47) GOODING

08S 15E 2 NW NE NW 3 (47) GOODING

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

01 - IRRIGATION

03/15

11/15

1.040

208.00

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Consumptive Use - + + - KW Usage - +
1.040 208.00 156.0+ - - - - Place of Use - - - - - +
Twn Rng Sec Tract Lot Acres Code Description County

07S 15E 34 NE SE 12.0 01 IRRIGATION (47) GOODING

07S 15E 35 NW SE 40.0 01 IRRIGATION (47) GOODING

Total Acres: 52.0

+ - - Diversion Means - WELL, PUMP & SPRINKLERS.

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use - NONE

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

THE FOLLOWING RIGHTS ARE ALSO DIVERTED THROUGH POINT OF DIVERSION
DESCRIBED ABOVE: 36-02666, 36-07103, 36-07324

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

No Old Water Right Numbers Found

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FEB 04 1993

Court Report Filing	- 00/00/0000	Field Inspection Made	- 00/00/0000	Civil Case Number	- 39576
Objection Filed Date	- 00/00/0000	Field Inspection Flag	-	Old Case Number	-
Response Filed Date	- 00/00/0000	Verified Date	- 07/19/1991	Old Judicial District	-
Claim Received Date	- 09/01/1988	Last Amended Date	- 00/00/0000	Temporary Right	- P
		Receipt Number	- S002043	Water District	-
		POU Ownership Flag	- Y	Federal/State Indicator	- S
		Name Connector	-	Presumption Flag	- C

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FEB 04 1992

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

09:39:39
08/06/90

PAGE: 11
QUICKLOOK INFORMATION

CLAIM NUMBER: A36-07605

WR ELEMENT	FIELD EXAM Y/N	CORRESPONDENCE SENT/RECEIVED BY WHOM/DATE	FIELD EXAM BY WHOM/DATE	CHANGE CLAIM Y/N	VERIFIED BY CODE	COMPLETED REVIEW WHOM/DATE	COMPLETED DATA ENTRY WHOM/DATE	VERIFIED DATE WHOM/DATE
PRIORITY DATE			Adm	N			RB 10-4-90	
POINT OF DIV	Y			Y	1,5			
SOURCE				N				
PLACE OF USE				N				
DIV. AMOUNT CFS/VOLUME				Y				
CONSUMPTIVE USE				Y				
PURPOSES				N				
PERIOD OF USE				N				
BASIS OF CLAIM				N				
REMARKS								

"VERIFIED BY" CODES

TOPO MAP/ORTHO-PQ = 1
ASCS MAP = 2
WATERMASTER RECORDS = 3
NAPP PHOTOS = 4
FIELD EXAM = 5
OTHER (SEE REMARKS) = 6

THESE CODES ARE USED TO INDICATE HOW THE FIELD EXAMINER VERIFIED THE INFORMATION
USED FOR THIS FIELD EXAMINATION. INDICATED ARE ALL CODES WHICH APPLY.

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FEB 04 1993

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM VERIFICATION REPORT

09:39:39
08/06/90

PAGE: 1
GENERAL INFORMATION

CLAIM NUMBER: A36-07605

LAST: AMBROSE
ADDRESS: P.O. BOX 247
CITY: WENDELL
PHONE NUMBER: 208-536-5332

FIRST: A.N.
STATE: ID ZIP: 83355

OWNER CODE: C

FIELD EXAM REQUIRED?

VERIFICATION REQUIRED DUE TO REMARKS?

DATABASE
N

FIELD
EXAMINER

NO REMARKS IN CLAIM

FIELD EXAMINATION INFORMATION

CONTACT PERSON: _____

PHONE NUMBER: (____) ____-____

DATE OF FIELD EXAM: 9/11/90

APPOINTMENT MADE: Y(____) N(____)

TIME: ____:____ A(____) P(____)

ACCOMPANIED BY: None

PHONE NUMBER: (____) ____-____

RELATIONSHIP TO CLAIMANT: _____

DIRECTIONS TO PROPERTY / REMARKS:

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A. AJ CLAIM: # A36-07605 PRIORITY DATE: 02-04-1976 STAGE: L

B. WR RECORD: # 36-07605 PRIORITY DATE: 02-04-1976 STAGE: L

C. FIELD EXAM REQUIRED?

	DATABASE	FIELD EXAMINER
DUE TO PRIORITY DATE DISCREPANCY? (Y/N)	N	

ARE THERE OBVIOUS REASONS TO QUESTION THE PRIORITY DATE CLAIMED? Y() N()
IF YES EXPLAIN.

REMARKS:

=====

RECOMMENDED PRIORITY DATE:
02-04-1976

REVIEWED BY

DATE

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FEB 04 1993

A. AJ CLAIM POINT OF DIVERSION AND SOURCE:

RIGHT	TWP.	RGE.	SEC.	1/4	1/4	1/4	LOT	CNTY
A36-07605	07S	15E	35	NE	SW	SW	~~2~~ 3	GOODING
A36-07605	08S	15E	2	NW	NE	NW		GOODING

OTHER AJ CLAIMS WITH SAME AJ POD
A PREFIX R PREFIX
A36-02666 NONE
A36-07103
A36-07324

WR RECORDS IN SAME 40 ACRE TRACT

36-02666
36-07103

SOURCE: GROUNDWATER

TRIB:

B. WR POINT OF DIVERSION AND SOURCE:

RIGHT	TWP.	RGE.	SEC.	1/4	1/4	1/4	LOT	CNTY
36-07605	07S	15E	35		SW	SW		GOODING

OTHER WR RECORDS WITH SAME WR POD

AJ CLAIMS IN SAME 40 ACRE TRACT
A PREFIX R PREFIX

36-02666
36-07103

A36-02666
A36-07103
A36-07324

SOURCE: GROUNDWATER

TRIB:

C. FIELD EXAM REQUIRED?

	DUE TO POD DISCREPANCY? (Y/N)	DUE TO SOURCE DISCREPANCY? (Y/N)	DATABASE	FIELD EXAMINER
	Y	N		

REMARKS:

Other licenses from both wells 20 drilled.

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RECOMMENDED POINT(S) OF DIVERSION AND SOURCE:

TWP.	RGE.	SEC.	1/4	1/4	1/4	LOT	COUNTY
<u>75</u>	<u>15E</u>	<u>35</u>	<u>NE</u>	<u>SW</u>	<u>SW</u>	<u>3</u>	<u>Gooding</u>
<u>85</u>	<u>15E</u>	<u>2</u>	<u>NW</u>	<u>NE</u>	<u>NW</u>	<u>3</u>	<u>"</u>

SOURCE: GROUNDWATER

TRIB:

REVIEWED BY: ADm

DATE: 9/11/90

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FEB 04 1993

A. ROOT WATER RIGHT NUMBERS: A36-07605

B. POU LISTING

TWP	RNG	SEC	1/4	1/4	LOT	NAME	AJ #/ACRES	WR #/ACRES	LANDSAT DATA	FIELD EXAM.	RECOMM. ACRES
07S	15E	34	NE	SE		AMBROSE, A.N.	A36-07605 /12.0	36-07605 /12.0	38.0		
						AMBROSE, A. N.	A36-10599 /	-			
						NORTH SIDE CANAL COMPANY LTD.	A01-00212Z0/35.0	-			
						AMBROSE, A.N.	A36-02666 / 8.0	36-02666 / 8.0			
07S	15E	35	NW	SE		AMBROSE, A.N.	A36-07605 /40.0	36-07605 /40.0	40.0		
						NORTH SIDE CANAL COMPANY LTD.	A01-00212Z0/10.0	-			
TOTAL ACRES							A36-07605	52.00	52.00	78.00	

ARE IRRIGATED ACRES FOUND IN TRACTS OTHER THAN INDICATED ABOVE, Y() N()
IF YES SEE ATTACHED SHEET:

C. FIELD EXAM REQUIRED?

DUE TO POU DISCREPANCY? (Y/N)

FIELD
EXAMINER
DATABASE
N

PRESUMPTION FLAG:

REMARKS:

Recommend is licensed & drilled.

RECOMMENDATIONS:

TOTAL ACRES:

52

REVIEWED BY:

AD

DATE:

9/11/90

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FEB 04 1993

A. AJ CLAIMED USES:

PURPOSES	MONTH/DAY	DIVERSION QUANTITY
A36-07605 IRRIGATION	FROM 03-15 TO 11-15	1.040 CFS
TOTAL DIVERSION RATE/VOLUME CLAIMED		1.040 CFS

B. WR RECORDED USES:

PURPOSES	MONTH/DAY	DIVERSION QUANTITY
36-07605 IRRIGATION	FROM 03-15 TO 11-15	1.040 CFS 208.00 AF/A
TOTAL DIVERSION RATE/VOLUME CLAIMED		1.040 CFS 208.00 AF/A

PRESUMPTION FLAG:

C. FIELD EXAM REQUIRED?

	DATABASE	FIELD EXAMINER
DUE TO WATER-USE DISCREPANCY? (Y/N)	N	_____
DUE TO DIVERSION RATE DISCREPANCY? (Y/N)	N	_____
DUE TO PERIOD FROM/TO DISCREPANCY? (Y/N)	N	_____

D. PERIOD OF USE:

RECOMMEND AS CLAIMED?

Y() N()

RECOMMEND TO WR STANDARDS OR OTHER?

Y() N() Explain in remarks, below.

REMARKS:

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FEB 04 1993

A. DOES DIVERSION RATE CLAIMED AGREE WITH EXISTING RECORDS?

Y(☒) N(☐)

AJ TOTAL CLAIMED DIVERSION RATE: 1.040 CFS
WR ROOT RIGHT TOTAL DIVERSION RATE: 1.040 CFS

*** IF NO or IF STATUTORY CLAIM or BENEFICIAL USE then flow measurement required. ***
** If an amount smaller than the original diversion rate is **
** claimed and an exam is NOT required, explain in remarks. **

FLOW MEASUREMENT REQUIRED?

FIELD
DATABASE EXAMINER
Y

DUE TO STAGE OR DIVERSION RATE DISCREPANCY? (Y/N)

B.

FLOW MEASUREMENT

MEASUREMENT METHOD N/A, SEE ATTACHED CALCULATIONS.

C. ARE OTHER WATER RIGHTS USED? ☒ (Y) N(☐) IF YES COMPLETE OVERLAP REVIEW.

OTHER RIGHTS LISTED IN CLAIM: NONE; OTHER RIGHTS OUT OF SAME SYSTEM

LIST ALL RIGHTS WITH A SAME POU AND IRRIGATION USAGE:

CLAIM	SOURCE	NAME	DIV. RATE	DIV. RATE/ACRE	DIV. VOL.	DIV. VOL./ACRE
A36-07605	GROUNDWATER	AMBROSE , A.N.	1.040	0.020		
A01-00212Z0	SNAKE RIVER	NORTH SIDE CANAL COMPANY LTD.	2250.000	0.081		

LIST ALL RIGHTS WITH SAME POU BUT NOT USED FOR IRRIGATION.

CLAIM NO.	PURPOSES	NAME	MONTH/DAY	RATE	VOLUME
A36-10599	DOMESTIC	AMBROSE , A. N.	FROM 01-01 TO 12-31	.040 CFS	
A36-10599	STOCKWATER	AMBROSE , A. N.	FROM 01-01 TO 12-31	.030 CFS	

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D. RATE/VOLUME CALCULATIONS: (IRRIGATION)

1a. IRRIGATION RATE
ACRES 52 x 0.02 CFS/ACRE = 1.04 CFS
(Taken from p/u review)

DOES AMOUNT CLAIMED EXCEED 0.02 CFS/ACRE? Y() N()

*** IF YES ADDITIONAL WATER USE FORM FILED AND ATTACHED? Y() N() ***

2. IRRIGATION CONSUMPTIVE USE

CLAIMED CONSUMPTIVE USE = 186.0 AF/A
ACRES 52 x CONSUMPTIVE VOL. AF/A FOR AREA 3.0 =
TOTAL CONSUMPTIVE USE 156 AF/A

3. IRRIGATION DIVERSION VOLUME

CLAIMED DIVERSION VOLUME = AF/A
ACRES 52 x DIVERSION VOL. AF/A FOR AREA 4.0 =
TOTAL DIVERSION VOLUME 208 AF/A

4. CALCULATIONS FOR USES OTHER THAN IRRIGATION:

SEE ATTACHED SHEET? Y() N()

REMARKS: (Include limitations on CONSUMPTIVE USE for combined rights.)

overlap with NSCC shares.

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RECOMMENDATIONS:

REC. PURPOSES	REC. PERIOD FROM TO	REC. DIV RATE CFS	REC. DIV VOL. AF/A	REC. CONS. USE
IRRIGATION	03-15 11-15	DATABASE EXAMINER 1.040 ✓	DATABASE EXAMINER 208	DATABASE EXAMINER ~~186.0~~ 156
TOTAL FOR THIS RIGHT		1.040		~~186.0~~

REVIEWED BY: Adm

DATE: 9/11/90

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FEB 04 1993

A. CHECK ONLY THE FOLLOWING THAT APPLY:

OWNERSHIP _____
FORFEIT/ABANDON _____
ADDITIONAL DIV. AMOUNT _____

ACCEPTED AS CLAIMED	NEEDS REVIEW
()	()
()	()
()	()

B. SPLIT WATER RIGHT REVIEW

ROOT WATER RIGHT NUMBER: 36-07605

TOTAL DIVERSION RATE OF WR SPLITS

DATABASE
1.040

EXAMINER

CFS

SPLITS:

OLD RIGHT NUMBERS	CURRENT CLAIM NUMBERS	DIVERSION RATE	CURRENT "R" CLAIM NUM.	"R" DIV. RATE	WR RIGHT NUMBERS	DIVERSION RATE
-	A36-07605	1.040	-		36-07605	1.040
TOTAL CFS		1.040				1.040

DIVERSION RATE REVIEW

DO THE SUM CFS RATE OF THE SPLITS EQUAL THE ROOT RIGHT CFS RATE? (Y/N)
IF NO, is the written review sheet attached? (Y/N)

DATABASE
Y

FIELD
EXAMINER

REMARKS:

AUTHENTICATION:

SIGNATURE: _____

DATE: 9/11/90

NAME OF FIELD EXAMINER: _____ TITLE: _____

MICROFILMED
FEB 04 1993