

Transfer No. 71978

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR TRANSFER OF WATER RIGHT
PART 1

RECEIVED

MAY 20 2005

Department of Water Resources
Southern Region
Phone 208-737-3200

Name of Applicant United States of America

Post Office Address U.S. Forest Service 2647 Kimberly Road East Twin Falls, ID 83301

A. PURPOSE OF TRANSFER

1. ☒ Change point of diversion ☐ Add diversion point(s) ☒ Change place of use
☐ Change Nature of Use ☐ Change period of use ☐ Other _____
2. Describe the reason for proposed changes To reduce the cost and improve the efficiency of this water development.

B. DESCRIPTION OF RIGHT(S) OR PORTION THEREOF, AFTER THE REQUESTED CHANGE

1. Right Number	Priority	Amount (cfs/ac-ft)	Nature of Use	Period of Use	
				From	To
47-02562	06-3-1963	.08	Domestic	01-01	12-31

2. Total amount of water being transferred .08 cubic feet per second and/or _____ acre-feet per annum.

3. Source of water Porcupine Spring tributary to Goose Creek.

4. Point(s) of Diversion:

Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Local Name for Diversion
	SW	NE	NE	31	14S	19E	Cassia	Porcupine Spring

5. Lands irrigated or place of use:

Twp.	Rge.	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	
14	18	24				D									D				

WITHDRAWN

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JUN 17 2005

Transfer No. 71978

6. General Information:

- a. Description of diversion system Spring box with storage tank and pipeline
- b. Are the lands from which you propose to transfer the water right subject to any liens, deeds of trust, mortgages, or contracts? ☐ Yes ☒ No. If yes, provide a notarized statement from the holder of the lien, deed of trust, mortgage, or contract agreeing to the proposed changes.
- c. Describe the affect on the land now irrigated if the place of use is changed pursuant to this transfer: N/A
- d. Remarks: Upper Penstomen Campground.

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that I have examined Application for Transfer of Water Rights No. _____, subject to the following limitations and conditions: _____.

Witness my hand this _____ day of _____, 20____.

Signature

WITHDRAWN

WITHDRAWN

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10/11/2016

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR TRANSFER OF WATER RIGHT
PART 2
(Attach one copy for each water right)

A. DESCRIPTION OF RIGHT AS RECORDED

1. Right evidenced by:

- a. Decree No. 47-02562 Decreed to United States of America in case of SRBA vs. _____ dated 05/21/1999 in SRBA District court county of Twin Falls.
- b. License No. _____ issued by the Idaho Department of Water Resources.
- c. Claim No. _____ on file with the Idaho Department of Water Resources.
- d. Transfer No. _____ which produced this right.

2. Attach a copy of last year's tax notice for the property to which the water right is appurtenant or other documents which show ownership. Label document as Attachment A. Check appropriate box below:

- ☐ Tax Notice ☐ Warranty Deed ☒ Other Property of the United States of America

3. Source of water Elk Corral Spring tributary to Fourth Fork Rock Creek.4. Date of priority 06/03/1963.

5. Water is used for the following purpose:

amount .08 for Domestic purposes from 01-01 to 12-31
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)

6. Total amount of water under right .08 cubic feet per second and/or _____ acre-feet per annum.

7. Point(s) of Diversion:

Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Local Name for Diversion
		SE	NE	24	14S	18E	Twin Falls	Elk Corral Spring

8. Lands irrigated or place of use:

Twp.	Rge.	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	
14	18	24			D	D													

Total Acres _____

9. Describe any other water rights used for the same purpose as described above N/A.10. To your knowledge, has any portion of this water right undergone a period of five or more consecutive years of non-use? ☐ Yes ☒ No If yes, describe: _____

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Transfer No. 71978**B. DESCRIPTION OF PORTION OF RIGHT BEING TRANSFERRED***(If the entire right is to be changed by the applicant, omit part B and C)*

1. amount (cfs/ac-ft) .08 for domestic purposes from 1-1 to 12-31
 amount (cfs/ac-ft) _____ for _____ purposes from _____ to _____
 amount (cfs/ac-ft) _____ for _____ purposes from _____ to _____

2. Point(s) of diversion:

Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Local Name for Diversion
		SE	NE	24	14S	18E	Twin Falls	Upper Penstemon Campground

3. Lands irrigated or place of use:

Twp.	Rge.	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	
14	18	24			D														

C. DESCRIPTION OF UNCHANGED PORTION OF RIGHT *(omit if there is no change)*

1. amount (cfs/ac-ft) .08 for domestic purposes from 01/01 to 12/31
 amount (cfs/ac-ft) _____ for _____ purposes from _____ to _____
 amount (cfs/ac-ft) _____ for _____ purposes from _____ to _____

2. Point(s) of diversion:

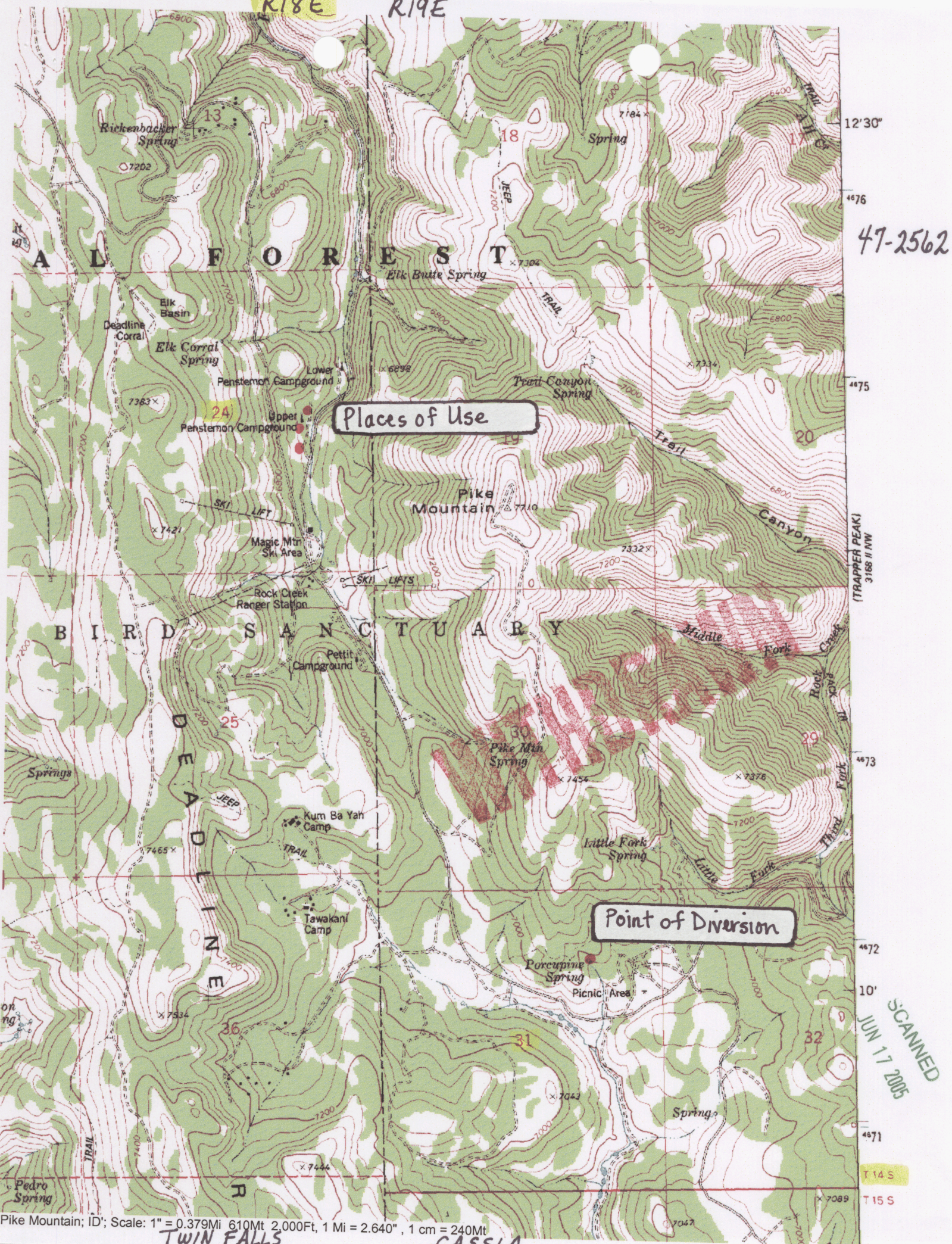
Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Local Name for Diversion

3. Lands irrigated or place of use:

Twp.	Rge.	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	
14	18	24				D													

Total Acres _____

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47-2562

Places of Use

Point of Diversion

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Pike Mountain; ID; Scale: 1" = 0.379Mi 610Mt 2,000Ft, 1 Mi = 2.640", 1 cm = 240Mt

TWIN FALLS

CASSIA

PART 3

B. CHANGES IN NATURE OF USE

1. New Nature of Use Amount Houses/days/year Period of Use
(cfs/ac-ft)
2. Quantity and quality of return flows and location of discharge: _____
3. Describe effects on other water uses resulting from the proposed change: No Changes in the nature of use.

I hereby assert that no one will be injured by such change and that the change does not constitute an enlargement in use of the original right. The information contained in the application is true to the best of my knowledge.

I understand that any willful misrepresentation made in this application may result in voiding its approval.

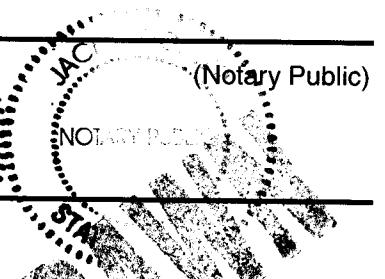
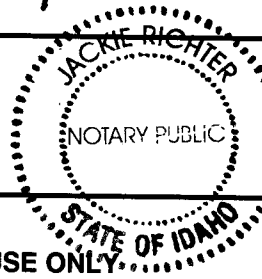
Ruth M. Mendon

(Signature of Applicant)

Subscribed and sworn to before me this 20 day of May, 2005.

Jackie Richter

My commission expires 2/21/2007



FOR DEPARTMENT USE ONLY

Transfer contains 5 pages and 1 attachments.

Received by: [Signature] Date 5/20/05

Prelim. check by [Signature] Fee \$100.00 SD27687

Received by [Signature] Date 5/20/05

Published in _____

Pub. Dates _____

Watermaster recommendation requested on _____

_____ rec'd. _____

Copy of transfer sent to lien holder _____

Protest filed by _____

Copies of protest forwarded by _____

Hearing held by _____ Date _____

Recommended for ☐ approval ☐ denial

by _____

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JUN 17 2005