

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2015

RECEIVED
JAN 19 2016
DEPT OF WATER RESOURCES
SOUTHERN REGION

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 650 Addison Ave. West Suite 500, Twin Falls ID, 83301, on or before **January 15, 2016.**

*data entered
check 3/17/16*

Reporter ID/Name:	_____	BOB JONES	_____
Water Source:	_____	AWALT HAGERMAN RANCH - ROBT	_____
Legal Description:	T _____	JONES REALTY	1/4 _____ 1/4
Site Tag No:	_____	06S 13E S35 SESW	_____
Diversion Name:	_____	BIRCH CK PONDS 1 & 2	_____
		A0007576 410114	9 _____

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☒

Name Awalt Family Revocable Trust

Phone 805-238-1315

Last, First, MI

or Bob Jones Realty @

Address PO Box 392

Fax 208-733-0404

City San Miguel

Mobile _____

State & Zip CA 93451-0392

e-mail _____

Operator or Contact Person (if different from owner)

Name Lemmon, Gary

Phone 208-837-4808

Last, First, MI

Fax 208-837-4808

Address 2775 S. 1050 E.

Mobile 208-280-4808

City Hagerman

e-mail glemmon@northrim.net

State & Zip ID 83332

SECTION II Water Use Information

Crop

Acres

Non-Irrigation Use(s)

Fish

Total acres

Number of idled acres

total AC-FT 410710

SECTION III Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	EST. 5.0				4.15	
2						5.73
3						
4						
5						
6						
7						
8					6.34	
9						
10						
11						6.00
12						
13						
14						
15					5.60	6.61
16						
17						
18						
19						
20						
21						
22					5.20	
23						
24						
25						
26						
27						
28						
29						
30		-----		EST. 5.0		
31		-----		-----		-----

No records available from Max Woolley

SECTION III Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.) PLEASE SHOW TURN ON/TURN OFF DATES

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						4.95
2	9.46					
3		6.00		6.61		
4			6.00			
5						
6		6.61			4.95	
7	7.76					
8						
9				6.61		
10						
11			6.00			
12					4.95	4.95
13		6.61				
14						
15	7.84					
16						
17						
18			6.00	6.00		
19						4.95
20		6.00			4.95	
21		7.18				
22						
23						
24						
25			6.00			
26				4.95		4.95
27					4.95	
28		6.00				
29						
30						
31			-----		-----	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): _____

40" Standard rectangular suppressed weir.

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

None

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

[Signature] Secretary 1-11-16
Signature Title Date
for Blind Canyon Aquaranch Inc.

Reviewed by N. Erickson
Data entry by [Signature]

For Department Use Only
Date 2/23/16
Date 3/17/16

RECEIVED

JAN 20 2015

DEPT OF WATER RESOURCES
SOUTHERN REGIONSTATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORTREPORTING YEAR 2014Data Entry
4/15/15
adkOPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICEATTENTION: Year end data must be submitted to Water District 130, 650 Addison Ave. West Suite 500, Twin Falls ID, 83301, on or before January 20, 2015.

Reporter ID/Name:	BOB JONES	
Water Source:	AWALT HAGERMAN RANCH - ROBT	
Legal Description:	JONES REALTY	
	06S 13E S35 SESW	1/4 1/4
Site Tag No:	BIRCH CK PONDS 1 & 2	
	A0007576 410114	9
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☒Name AWALT CHERSTY, L.

Last, First, MI

Address P.O. BOX 392City SAN MIGUELState & Zip CA. 93451Phone (208) 733-0404

Fax _____

Mobile _____

e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.

Last, First, MI

Address 4452 NORTH 2000 EASTCity FILERState & Zip ID. 83328Phone (208) 326-7213

Fax _____

Mobile (208) 243-0733e-mail MJWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop

Acres

NONE

Total acres

NONE

Non-Irrigation Use(s)

AQUACULTURE

Number of idled acres

SECTION III Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	5.21 Est					
2					4.95	
3	5.35					
4				4.62		
5						
6						4.95
7		5.08	4.68			
8						
9					4.95	
10	5.35					
11				4.55		
12						
13						4.95
14		4.95	4.68			
15						
16					5.21	
17	5.35					
18				7.21		
19						
20						7.51
21		4.95	4.68			
22						
23					7.51	
24	5.08					5.9
25			4.68	6.62		
26						
27						
28		4.95				
29						
30		-----				
31	5.15	-----		-----		-----

SECTION III Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)* **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1		5.48				
2						
3				6.91		
4	5.08					
5			6.33			5.21
6						
7					5.21	
8		6.04				
9						
10				6.91		
11	5.08					
12			7.66			4.95
13						
14					5.21	
15		7.82				4.43
16						
17				7.51		
18	5.08					
19			7.51			
20						
21					4.95	
22		7.97				
23						
24				6.04		
25	4.95					
26			7.51			4.55
27						
28					4.95	
29		7.51				
30						
31			—	5.48	—	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s):

WEIR

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

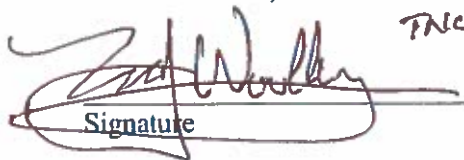
SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

NONE

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.


Signature

THE IDAHO FARMS
MANAGER

Title

1/15/15
Date

Reviewed by

N. Erickson

Data entry by

Chen

For Department Use Only

Date

4/15/15

Date

4/15/15

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2012

RECEIVED

JAN 10 2013

DEPT. OF WATER RESOURCES
SOUTHERN REGION

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before January 25, 2013.

Reporter ID/Name:	MAX WOOLLEY	
Water Source:	06S 13E S35 SESW	
Legal Description:	BIRCH CK PONDS 1 & 2	
	A0007576 410114	9 1/4 1/4
Site Tag No:		
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name AWALT, CHRISTY, L.
Last, First, MI
Address P.O. BOX 392
City SAN MIGUEL
State & Zip CA. 93451

Phone (208) 733-0404
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.
Last, First, MI
Address 4452 NORTH 2000 EAST
City FELEER
State & Zip ID. 83328

Phone (208) 326-7213
Fax _____
Mobile (208) 243-0733
e-mail MSWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop	Acres
<u>NONE</u>	<u>NONE</u>
Total acres	

Non-Irrigation Use(s)
AQUACULTURE

Number of idled acres

4.55

SECTION III Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2						
3		4.68	4.68			
4					6.62	
5						
6	4.55			4.68		
7						6.76
8						
9			4.68			
10		4.55				
11					5.21	
12						
13	4.68			4.43		
14						
15						5.62
16			4.55			
17		4.43				
18					4.95	
19						
20	4.68			4.43		
21						
22						5.48
23			4.55			
24		4.68				
25					4.68	
26						
27	4.55			4.43		
28						
29						5.08
30		-----	4.43			
31		-----		-----	6.47	-----

SECTION III Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)* **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2					6.04	
3		7.21				
4						
5				7.21		
6	5.21					
7			7.21			5.15
8						
9					5.42	
10		6.91	7.21			
11						
12				7.21		
13	6.33					
14						4.95
15						
16					5.62	
17		7.21				
18						
19				6.11		
20	7.51					
21			7.21			5.21
22						
23					5.48	
24		7.59				
25						
26				5.48		
27	7.82					
28			7.21			4.81
29						
30					5.21	
31		7.51	—		—	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): WEIR

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

None

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Signature

IDAHO FARMS
MANAGER
Title

Date

1/8/2013

For Department Use Only

Reviewed by

Date

Data entry by

Date

Chick

4/13/13

Data Eng
4/4/12

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

RECEIVED
JAN 12 2012
DEPT. OF WATER RESOURCES
SOUTHERN REGION

REPORTING YEAR 2011

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 15, 2012.**

Reporter ID/Name:	MAX WOOLLEY	
Water Source:	06S 13E S35 SESW	
Legal Description:	BIRCH CK PONDS 1 & 2	
	A0007576 410114	9 4 1/4
Site Tag No:		
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name AWALT, CHRISTI, L.
Last, First, MI
Address P.O. BOX 392
City SAN MIGUEL
State & Zip CA. 93451

Phone (208) 733-0404
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.
Last, First, MI
Address 4452 NORTH 2000 EAST
City PELLER
State & Zip ID. 83328

Phone (208) 326-7213
Fax _____
Mobile (208) 243-0733
e-mail MJWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop	Acres
<u>None</u>	<u>None</u>
Total acres	

Non-Irrigation Use(s)
AQUACULTURE

Number of idled acres

SECTION III Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1				4.43		
2						
3						
4		4.68	4.43			7.21
5						
6					4.17	
7	4.95					
8				4.43		
9						
10						6.91
11		4.68	4.43			
12						
13					4.55	
14	4.95					
15				4.17		
16						
17						6.04
18		4.43	4.43			
19						
20					4.68	
21	4.43					
22				4.43		
23						5.76
24			4.55			
25		4.43				
26						
27					6.33	
28	4.43					
29				4.55		
30		-----				
31		-----		-----		-----

SECTION III Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)* **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	5.76					
2			6.91			4.95
3						
4					6.47	
5		6.33				
6						
7				7.82		
8	5.08					
9			6.91			4.81
10						
11					5.76	
12		6.04				
13						
14				6.62		
15	6.04					
16			6.62			5.08
17						
18					5.48	
19		6.62				
20						
21			7.21	8.44		
22	6.76					
23						4.55
24						
25					5.48	
26		6.62				
27						
28				6.47		4.55
29	5.48					
30			7.66			
31			—		—	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): WEIR

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year. None

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

[Signature]
Signature

IDAHO FARM MANAGER
Title

1/10/2012
Date

For Department Use Only

Reviewed by _____
Data entry by Chen

Date _____
Date 4/4/12

Det. Conf
2/15/11

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

RECEIVED
JAN 14 2011
DEPT. OF WATER RESOURCES
SOUTHERN REGION

REPORTING YEAR 2010

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 15, 2011.**

Reporter ID/Name:	MAX WOOLLEY	
Water Source:	AWALT HAGERMAN RANCH	
Legal Description:	T 06S 13E S35 SES	1/4
Site Tag No:	BIRCH CK PONDS 1 & 2	
Diversion Name:	A0007576 410114	9

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☒

Name AWALT, CHERSTY, L
Last, First, MI
Address P.O. Box 392
City SAN MIGUEL
State & Zip CA. 93451

Phone (208) 733-0404
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.
Last, First, MI
Address 4452 NORTH 2000 EAST
City FILER
State & Zip ID. 83328

Phone (208) 326-7213
Fax _____
Mobile (208) 243-0733
e-mail MSWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop

Acres

None
Total acres

None

Non-Irrigation Use(s)

AQUACULTURE

Number of Idled acres

514

SECTION III Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*) PLEASE SHOW TURN ON/TURN OFF DATES

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2				4.62		
3						
4	5.08					6.40
5		4.81	4.68			
6						
7					4.75	
8						
9				4.55		
10						
11						6.47
12		4.75	4.62			
13						
14					5.01	
15	5.01					
16				4.55		
17						
18						5.83
19		4.68	4.62			
20						
21					5.28	
22	4.95					
23				4.49		
24						
25						5.83
26		4.68	4.62			
27						
28					6.33	
29	4.88					
30		-----		4.55		
31		-----		-----		-----

SECTION III Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2	5.83					
3			6.11			5.01
4						
5					5.69	
6		5.83				
7						
8				6.47		
9	6.18					
10			6.11			5.01
11						
12					5.48	
13		5.97				
14						
15				6.26		
16	5.83					
17			6.04			4.81
18						
19					5.08	
20		6.18				
21						
22				6.18		
23	5.69					4.95
24						
25						
26					5.21	
27		6.47				
28				6.11		
29			6.18			
30	5.69					5.08
31			—		—	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): WEIR

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

NONE

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.


Signature

IDaho FARM MANAGER

Title

1/12/2011
Date

For Department Use Only

Reviewed by Alan

Date

Data entry by

Date 2/18/11

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2009

RECEIVED
JAN 19 2010
DEPT. OF WATER RESOURCES
SOUTHERN REGION

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before January 15, 2010.

Reporter ID/Name:	_____	ANGIE JONES	_____
Water Source:	_____	AWALT HAGERMAN RANCH	_____
Legal Description:	T _____	06S 13E S35 SES	1/4 _____ 1/4 _____
Site Tag No:	_____	BIRCH CK PONDS 1 & 2	_____
	_____	A0007576 410114	9 _____
Diversion Name:	_____		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name Awalt, Christy L

Phone 208-733-0404

Last, First, MI PO Box 392

Fax _____

Address _____

City San Miguel

Mobile _____

State & Zip CA, 93451

e-mail _____

Operator or Contact Person (if different from owner)

Name Jones, Angie R

Phone 208-934-5831

Last, First, MI 1828 E. 1700 S.

Fax _____

Address _____

City Gooding, ID

Mobile 208-280-0308

State & Zip ID 83330

e-mail Jonesa@9.com

SECTION II Water Use Information

Crop	Acres
<u>none</u>	<u>none</u>
_____	_____
_____	_____
_____	_____
Total acres	_____

Non-Irrigation Use(s)
<u>none</u>

Number of idled acres _____

interpolate

SECTION III Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.) **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1					4.63	
2	4.88					
3				4.63		
4						
5						5.53
6		4.88	4.63			
7						
8					4.88	
9	4.63					
10				4.76		
11						
12						5.66
13		4.39	4.76			
14						
15					4.88	
16	4.15					
17				4.63		
18						
19						5.53
20		4.76	4.76			
21						
22					5.40	
23	4.15					
24				4.39		
25						
26						5.66
27		4.39	4.63			
28						
29					5.66	
30	4.76	-----				
31		-----		-----		-----

SECTION III Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)* **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2	5.53			5.93		
3						
4			5.79			5.27
5						
6					5.27	
7		5.66				
8						
9				5.79		
10	5.53					
11			5.79			5.27
12						
13					5.40	
14		5.79				
15						
16				5.79		
17	5.53					
18			5.93			5.27
19						
20					5.27	
21		5.79				
22						
23				5.93		
24	5.53					5.14
25			5.93			
26						
27					5.27	
28		5.79				
29						
30				5.93		
31	5.53		-----		-----	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): Weir

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

none

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Angela Jmr
Signature

Reporter
Title

1/14/2010
Date

Reviewed by Cher
Data entry by

For Department Use Only

Date 5/18/10

DE

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2008

RECEIVED
FEB 18 2009
DEPT. OF WATER RESOURCES
SOUTHERN REGION

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Water District 130, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 31, 2009.**

Reporter ID/Name:	ANGIE JONES	
Water Source:	06S 13E 35 SE SW	
Legal Description:	T BIRCH CK PONDS 1 & 2	
	A0007576 410114	9 1/4 1/4
Site Tag No:		
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name Awalt Christy L
Last, First, MI
Address PO Box 392
City San Miguel
State & Zip CA 93451

Phone 208-733-0404
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name Jones Angie R
Last, First, MI
Address 1828 E. 1700S
City Garding
State & Zip ID 83330

Phone 208-934-5831
Fax _____
Mobile 208-280-0308
e-mail Jonesa@g.com

SECTION II Water Use Information

Crop

Acres

Non-Irrigation Use(s)

None

None

None

Total acres

Number of idled acres

Int. all. - use estimate flag
through March 18

SECTION III Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.) PLEASE SHOW TURN ON/TURN OFF DATES

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	3.79	3.59				
2					4.39	
3						
4				3.45		
5						
6						5
7						
8						
9					4.15	
10						
11				3.45		
12						
13						4.76
14						
15						
16					3.91	
17						
18			3.79	3.79		
19			3.01			
20						5.14
21						
22						
23					5	
24						
25				3.23		
26						
27						5.4
28			3.01			
29						
30		-----			6.47	
31		-----		-----		-----

SECTION III Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)* **PLEASE SHOW TURN ON/TURN OFF DATES**

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2		5.27				
3						
4	6.9			4.51		
5						5.27
6			4.88			
7						
8						
9						
10		5.4		4.63		
11						5.27
12	6.06		4.63			
13						
14						
15						
16						
17		5.27		5.01		
18						
19			4.63			5.27
20	5.27					
21					5.93	
22						
23						5.27
24		5.01		5.27		
25						
26			4.15			
27	5.27					
28					5.93	
29						
30						
31		4.88	-----	5.79	-----	

SECTION IV Measuring Device Information

A. Type & Description of Measuring Device(s): weir

B. Attach copies of all measuring device rating tables to this report (omit if previously supplied).

SECTION V Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device during the reporting year.

None

SECTION VI Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Angela J. J. J.
Signature

Reporter
Title

1/31/09
Date

Reviewed by _____
Data entry by Chloe

For Department Use Only

Date _____
Date 5/1/09

NTDI 12/00

RECEIVED

JAN 12 2006

Department of Water Resources
Southern Region

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2005

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 15** of the following year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	_____		
Water Source:	_____	41725	410114
Water Right No:	_____	BARBARA SIMMS	
Legal Description:	T _____	06S 13E 35 SESW	
Site Tag No:	_____	A0007576	
Diversion Name:	_____	SIMMS POND 1 & 2	9

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name SIMMS BARBARA J
Last, First, MI
Address 17816 US 30
City BLISS ID
State & Zip 83314

Phone 837 4537
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name _____
Last, First, MI
Address _____
City _____
State & Zip _____

Phone _____
Fax _____
Mobile _____
e-mail _____

Original Owner (if sold within last year)

Name _____
Last, First, MI
Address _____
City, State & Zip _____

Phone _____

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1				NO	5.14	
2				Diversion		
3				Thru		
4				Pumps		
5						
6						
7	5.27	5.40	5.53	0	5.14	5.93
8						
9						
10						
11						
12						
13						
14	5.53	5.27	5.40	0	5.53	6.06
15						
16						
17						
18						
19						
20						
21	5.79	5.40	5.27	0	5.79	5.93
22						
23						
24						
25						
26						
27						
28	5.53	5.53	10	0	5.93	6.06
29						
30		-----				
31		-----		-----		-----
	168.57	156.73	144.58	0	169.78	179.2

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						NO
2						Dispersed
3						Thru Rows
4						
5						
6						
7	6.06	6.20	6.47	6.75	6.61	5.93
8						
9						
10						
11						
12						
13						
14	6.20	6.34	6.47	6.90	0	0
15						
16						
17						
18						
19						
20						
21	6.16	6.34	6.61	6.90	0	0
22						
23						
24						
25						
26						
27						
28	6.20	6.47	6.61	6.75	0	0
29						
30						
31			-----		-----	

189.4 195.24 195.5 211.35 85.93 0

Total cfs 1698.28
Total AF 3368.5

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured Effluent SimmsPond 1+2. Water Depth measured across dam boards.flow calculated using IDWR Discharge Table

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:

Beginning diversion date ____/____/____
month dayEnding diversion date ____/____/____
month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

SECTION V CertificationI hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.Barbara J. Simms
Signatureowner
Title1/12/06
Date**IMPORTANT:** Each reporting form shall be accompanied by a report processing fee in the amount of **twenty-five dollars (\$25) per diversion** made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.**For Department Use Only**Received by C. AllenDate 1/13/06

Time _____

Fee amount submitted 2500

Correct? yes _____ no _____

Receipted by C. AllenReceipt No. 5028290

Reviewed by _____

Date _____

Data entry by _____

Date _____

Max Div Rate (cfs) _____

Date _____ Total Vol (acre-feet) _____

A fee is required with this form. Please see page 4.

NTDI:12/00

*Data Entered
2/15/07
aw*

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT**

RECEIVED

JAN 14 2005

Department of Water Resources
Southern Region

REPORTING YEAR 2004

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 15** of the following year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:			
Water Source:	41725	410114	
Water Right No:	BIRCH CREEK		
Legal Description:	06S 13E 35 SESW		
Site Tag No:	A0007576	3	3
Diversion Name:	SIMMS POND 1 & 2	9	

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name SIMMS BARBARA J
Last, First, MI
Address 17816 US 30
City Bliss
State & Zip ID 83314

Phone 837 4537
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name _____
Last, First, MI
Address _____
City _____
State & Zip _____

Phone _____
Fax _____
Mobile _____
e-mail _____

Original Owner (if sold within last year)

Name _____
Last, First, MI
Address _____
City, State & Zip _____

Phone _____

SECTION II Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2						
3						
4						
5						
6						
7	5.27	4.88	4.63	4.88	4.63	5.01
8						
9						
10						
11						
12						
13						
14	5.14	5.01	4.88	4.88	4.51	5.01
15						
16						
17						
18						
19						
20						
21	5.01	5.01	5.01	4.63	4.63	5.01
22						
23						
24						
25						
26						
27						
28	4.88	4.88	5.01	4.51	4.88	5.27
29						
30		-----				
31		-----		-----		-----

159.08 143.34 149.46 143.54 143.69 150.3
 142.97

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2						
3						
4						
5						
6						
7	5.27	5.53	6.06	6.06	5.66	5.53
8						
9						
10						
11						
12						
13						
14	5.53	5.66	6.20	5.93	5.53	5.53
15						
16						
17						
18						
19						
20						
21	5.66	5.93	6.34	5.93	5.66	5.53
22						
23						
24						
25						
26						
27						
28	5.53	5.93	6.47	5.93	5.53	5.53
29						
30						
31			-----		-----	

168.92 176.74 ~~168.92~~ 181.95 187.98 170.12 171.43

Total cfs 1945.87
Total AF 3859.6

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): Flow measured at Effluent Simms Pond. Water Depth measured across Dam boards, flow calculated using IDWR Discharge Table

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:
Beginning diversion date ____/____/____ Ending diversion date ____/____/____
month day month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

SECTION V Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Barbara J. Simms Pres
Signature Title

1/13/05
Date

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of **twenty-five dollars (\$25) per diversion** made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.

For Department Use Only

Received by C. Blue

Date 1/14/05

Time _____

Fee amount submitted 25.00

Correct? yes ____ no ____

Received by _____

Receipt No. 5027295

Reviewed by _____

Date _____

Data entry by _____

Date _____

Max Div Rate (cfs) _____

Date _____ Total Vol (acre-feet) _____

A fee is required with this form. Please see page 4.

NTD1:12/00

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2003

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before January 15 of the following year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	41725	410114
Water Source:	BARBARA SIMMS	
Water Right No:	06S 13E 35 SESW	
Legal Description:	A0007576	
Site Tag No:	SIMMS POND 1 & 2	9
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction

Name SIMMS BARBARA J
Last, First, MI
Address 17816 US30
City Bliss
State & Zip ID 83314

Phone 837 4537
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name _____
Last, First, MI
Address _____
City _____
State & Zip _____

Phone _____
Fax _____
Mobile _____
e-mail _____

Original Owner (if sold within last year)

Name _____
Last, First, MI
Address _____
City, State & Zip _____

Phone _____

RECEIVED

JAN 13 2004

Department of Water Resources
Southern Region

MAY 25 2004

Department of Water Resources

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	(5.3 @)					
2						
3	interp					
4						
5						
6						
7	5.66	5.53	5.14	5.40	5.14	5.27
8						
9						
10						
11						
12						
13						
14	5.53	5.27	5.14	5.40	5.14	5.27
15						
16						
17						
18						
19						
20						
21	5.53	5.27	5.27	5.53	5.14	5.53
22						
23						
24						
25						
26						
27						
28	5.53	5.27	5.27	5.40	5.27	5.53
29						
30		-----				
31		-----		-----		-----

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2						
3						
4						
5	Not 5.53					
6						
7	5.27	5.53	○	○	5.53	5.27
8						
9						
10						
11						
12						
13						
14	5.53	5.66	○	○	5.53	5.40
15						
16						
17						
18						
19						
20				Begin Diversow		
21	5.53	No Diversow	○	5.27	5.40	5.27
22		○				
23						
24						
25						
26						
27						
28	5.27	○	○	5.40	5.27	5.27
29						
30						
31			—		—	RECEIVED

JAN 13 2004

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured at Effluent SimmsPOND 1. WATER DEPTH MEASURED ACROSS DAM BOARDS, flow calculated using IDWR Discharge Table.

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:

Beginning diversion date ____/____/____
month dayEnding diversion date ____/____/____
month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

SECTION V CertificationI hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Robert J. Simms President - C/Simms Co., Inc. 01/09/04
 Signature Title Date

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of twenty-five dollars (\$25) per diversion made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.**For Department Use Only**

Received by _____ Date _____ Time _____
 Fee amount submitted 25.00 Correct? yes _____ no _____
 Receipted by WJ Receipt No. 5026392
 Reviewed by 20 Date 1-24-04
 Data entry by _____ Date _____
 Max Div Rate (cfs) 15.66 Date JAN Total Vol (acre-feet) _____

A fee is required with this form. Please see page 4.

NTD1-12/00

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2003

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before January 15 of the following year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	41725	410114
Water Source:	BARBARA SIMMS	
Water Right No:	06S 13E 35 SESW	
Legal Description:	A0007576	
Site Tag No:	SIMMS POND 1 & 2	9
Diversion Name:		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction

Name SIMMS BARBARA J
Last, First, MI
Address 17816 US30
City Bliss
State & Zip ID 83314

Phone 837 4537
Fax _____
Mobile _____
e-mail _____

Operator or Contact Person (if different from owner)

Name _____
Last, First, MI
Address _____
City _____
State & Zip _____

Phone _____
Fax _____
Mobile _____
e-mail _____

Original Owner (if sold within last year)

Name _____
Last, First, MI
Address _____
City, State & Zip _____

Phone _____

RECEIVED

JAN 13 2004

Department of Water Resources
Southern Region

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2						
3						
4						
5						
6						
7	5.66	5.53	5.14	5.40	5.14	5.27
8						
9						
10						
11						
12						
13						
14	5.53	5.27	5.14	5.40	5.14	5.27
15						
16						
17						
18						
19						
20						
21	5.53	5.27	5.27	5.53	5.14	5.53
22						
23						
24						
25						
26						
27						
28	5.53	5.27	5.27	5.40	5.27	5.53
29						
30		-----				
31		-----		-----		-----

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2						
3						
4						
5						
6						
7	5.27	5.53	○	○	5.53	5.27
8						
9						
10						
11						
12						
13						
14	5.53	5.66	○	○	5.53	5.40
15						
16						
17						
18						
19						
20				Begin Diversen		
21	5.53	NO Diversen	○	5.27	5.40	5.27
22		○				
23						
24						
25						
26						
27						
28	5.27	○	○	5.40	5.27	5.27
29						
30						
31			-----		-----	RECEIVED

JAN 13 2004

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured AT Effluent SimmsPOND 1. Water Depth measured across DAM boards, flow calculated using IDWR Discharge Table.

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:

Beginning diversion date ____/____/____
month dayEnding diversion date ____/____/____
month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

SECTION V CertificationI hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Robert J. Simms President - C/Simms Co., Inc. 01/09/06
 Signature Title Date

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of **twenty-five dollars (\$25) per diversion** made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.**For Department Use Only**

Received by _____ Date _____ Time _____
 Fee amount submitted 25.00 Correct? yes _____ no _____
 Receipted by [Signature] Receipt No. 5026392
 Reviewed by _____ Date _____
 Data entry by _____ Date _____
 Max Div Rate (cfs) _____ Date _____ Total Vol (acre-feet) _____

NTD1:12/00

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2002

RECEIVED
JAN 13 2003
Department of Water Resources
Southern Region

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1341 Fillmore St Ste 200, Twin Falls ID, 83301, on or before **January 15** of the following year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	—	41725	410114
Water Source:	—	BARBARA SIMMS	
Water Right No:	—	BIRCH CREEK	
Legal Description:	T	06S 13E 35 SESW	
		A0007576	
Site Tag No:	—	SIMMS POND 1 & 2	9
Diversion Name:	_____		

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name SIMMS BARBARA J
Last, First, MI

Phone 208 837 4537

Address 17816 US 30

Fax _____

City Bliss

Mobile _____

State & Zip ID 83314

e-mail _____

Operator or Contact Person (if different from owner)

Name _____
Last, First, MI

Phone _____

Address _____

Fax _____

City _____

Mobile _____

State & Zip _____

e-mail _____

Original Owner (if sold within last year)

Name _____
Last, First, MI

Phone _____

Address _____

City, State & Zip _____

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2						
3						
4						
5						
6						
7	5.27	5.40	5.40	5.66	5.40	N/A
8					Dtm boards	
9					Removed for	
10					Weed Removal	
11						
12						
13						
14	5.14	5.53	5.27	5.66	N/A	5.14
15						
16						
17						
18						
19						
20						
21	5.14	5.53	5.40	5.53	N/A	5.14
22						
23						
24						
25						
26						
27						
28	5.40	5.40	5.53	5.40	N/A	5.27
29						
30		-----	-----	-----		
31		-----	-----	-----		-----

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1				Ø	Ø	Ø
2						
3						
4						
5						
6						
7	5.27	5.27	5.66	N/A	N/A	N/A
8						
9						
10						
11						
12						
13						
14	5.27	5.40	5.93	N/A	N/A	N/A
15						
16						
17						Water Diverted
18						into Pond 1 & 2
19						(Start up)
20						
21	5.14	5.40	6.34	N/A	N/A	5.40
22						
23						
24						
25			6.34			
26			Water Ø			
27			Diverted			
28	5.14	5.53	from	N/A	N/A	5.27
29			Pond 1 & 2			
30						
31			—		—	

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured at Effluent SimmsPond 1. Water depth measured across dam boards flow calculated
using IDWR Discharge Tables

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:

Beginning diversion date /
month dayEnding diversion date /
month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

N/A**SECTION V Certification**I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.Debra J. Simms
SignatureTrustee
Title Simms Family Trust2/20/03
Date**IMPORTANT:** Each reporting form shall be accompanied by a report processing fee in the amount of **twenty-five dollars (\$25)** per diversion made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.**For Department Use Only**Received by cyDate 1-13-03Time Fee amount submitted 25Correct? yes noReceipted by cyReceipt No. 5025420Reviewed by cyDate 2-04-03Data entry by Date Max Div Rate (cfs) Date Total Vol (acre-feet)

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT**

REPORTING YEAR 2001

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1301 N. Orchard, Boise Idaho 83706, on or before January 15 of the ensuing year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	41725	410114
Water Source:	BARBARA SIMMS	
Water Right No:	BIRCH CREEK	
Legal Description:	06S 13E 35 SESW	
Site Tag No:	A0007576	
Diversion Name:	SIMMS POND 1 & 2	

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

✓ Name SIMMS BARBARA J
 Last, First, MI
 ✓ Address 17816 0530
 ✓ City Bliss
 ✓ State & Zip ID 83314

Phone _____

Fax _____

Mobile _____

e-mail _____

Operator or Contact Person (if different from owner)

Name _____
 Last, First, MI
 Address _____
 City _____
 State & Zip _____

Phone _____

Fax _____

Mobile _____

e-mail _____

Original Owner (if sold within last year)

Name _____
 Last, First, MI
 Address _____
 City, State & Zip _____

Phone _____

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	↑		5.79		5.14	
2	6.06					
3						
4						
5						
6						
7	5.93	5.93	5.79	5.27	5.27	5.66
8						
9						
10						
11						
12						
13						
14	5.79	5.93	5.53	N/A	5.53	5.93
15						
16						
17						
18						
19						
20						
21	5.79	6.06	5.40	5.27	5.66	5.93
22						
23						
24						
25						
26						
27						
28	5.93	5.79	5.27	5.14	5.93	5.66
29						
30		-----				
31		-----		-----		-----

SECTION II Water Measurement Log (Continued). *(measurements must be recorded at least once per week and in units of cubic feet per second.)*

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2						
3						
4						
5						
6						
7	5.93	6.34	6.47	6.20	6.06	5.93
8						
9						
10						
11						
12						
13						
14	5.93	6.61	6.34	6.47	6.06	5.79
15						
16						
17						
18						
19						
20						
21	6.06	6.61	6.20	6.34	5.93	5.79
22						
23						
24						
25						
26						
27						
28	6.06	6.47	6.06	6.34	5.93	5.93
29						
30						
31			—		—	

SECTION III Measuring Device Information
A. Type & Description of Measuring Device(s): Flow measured in inches over
Dam: Guards Effluent of Simms Pond #1. Flow calculated
using IDWR Discharge Tables

Beginning diversion date _____ / _____
month day

Ending diversion date /
month day

SECTION IV Modifications made to water system

NEW DAM GORDONS INSTALLED Pond 1 4/20/01

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Signature

Other.
Title

Date 1/14/02

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of twenty-five dollars (\$25) per diversion made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.

Received by J. Mass
 Fee amount submitted 2500
 Receipted by J. Mass
 Reviewed by _____
 Data entry by D. J.
 Max Div Rate (cfs)

Date 1-15-02

Time 2:39

Correct? yes ☒ no ☐

Receipt No. 2059.189

Date _____

Date 1/25/02

Date	Total Vol (acre-feet)
12/1/79	100
12/2/79	100
12/3/79	100
12/4/79	100
12/5/79	100
12/6/79	100
12/7/79	100
12/8/79	100
12/9/79	100
12/10/79	100
12/11/79	100
12/12/79	100
12/13/79	100
12/14/79	100
12/15/79	100
12/16/79	100
12/17/79	100
12/18/79	100
12/19/79	100
12/20/79	100
12/21/79	100
12/22/79	100
12/23/79	100
12/24/79	100
12/25/79	100
12/26/79	100
12/27/79	100
12/28/79	100
12/29/79	100
12/30/79	100
12/31/79	100
1/1/80	100
1/2/80	100
1/3/80	100
1/4/80	100
1/5/80	100
1/6/80	100
1/7/80	100
1/8/80	100
1/9/80	100
1/10/80	100
1/11/80	100
1/12/80	100
1/13/80	100
1/14/80	100
1/15/80	100
1/16/80	100
1/17/80	100
1/18/80	100
1/19/80	100
1/20/80	100
1/21/80	100
1/22/80	100
1/23/80	100
1/24/80	100
1/25/80	100
1/26/80	100
1/27/80	100
1/28/80	100
1/29/80	100
1/30/80	100
1/31/80	100
2/1/80	100
2/2/80	100
2/3/80	100
2/4/80	100
2/5/80	100
2/6/80	100
2/7/80	100
2/8/80	100
2/9/80	100
2/10/80	100
2/11/80	100
2/12/80	100
2/13/80	100
2/14/80	100
2/15/80	100
2/16/80	100
2/17/80	100
2/18/80	100
2/19/80	100
2/20/80	100
2/21/80	100
2/22/80	100
2/23/80	100
2/24/80	100
2/25/80	100
2/26/80	100
2/27/80	100
2/28/80	100
2/29/80	100
2/30/80	100
3/1/80	100
3/2/80	100
3/3/80	100
3/4/80	100
3/5/80	100
3/6/80	100
3/7/80	100
3/8/80	100
3/9/80	100
3/10/80	100
3/11/80	100
3/12/80	100
3/13/80	100
3/14/80	100
3/15/80	100
3/16/80	100
3/17/80	100
3/18/80	100
3/19/80	100
3/20/80	100
3/21/80	100
3/22/80	100
3/23/80	100
3/24/80	100
3/25/80	100
3/26/80	100
3/27/80	100
3/28/80	100
3/29/80	100
3/30/80	100
3/31/80	100
4/1/80	100
4/2/80	100
4/3/80	100
4/4/80	100
4/5/80	100
4/6/80	100
4/7/80	100
4/8/80	100
4/9/80	100
4/10/80	100
4/11/80	100
4/12/80	100
4/13/80	100
4/14/80	100
4/15/80	100
4/16/80	100
4/17/80	100
4/18/	

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT**

REPORTING YEAR 2000

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources, 1301 N. Orchard, Boise Idaho 83706, on or before January 15 of the ensuing year.

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

Name:	41725		
Water Source:	BARBARA SIMMS		
Water Right No:	BIRCH CREEK		
Legal Description:	06S 13E 35 SESW		
	A0007576	410114	
Site Tag No:	SIMMS POND 1 & 2	9	
Diversion Name:			

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right Owner

Please check for address correction ☐

Name SIMMS, BARBARA J.

Phone (208) 837-4537

Last, First, MI

Address 17816 US Hwy 30 ✓

Fax _____

City Bliss ID

Mobile _____

State & Zip 83314

e-mail _____

Operator or Contact Person (if different from owner)

Name _____

Phone _____

Last, First, MI

Address _____

Fax _____

City _____

Mobile _____

State & Zip _____

e-mail _____

Original Owner (if sold within last year)

Name _____

Phone _____

Last, First, MI

Address _____

City, State & Zip _____

SECTION II Water Measurement Log (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	6.06	5.66	5.53	5.79	5.93	6.34
2						
3						
4						
5						
6						
7	6.06	5.53	5.53	5.66	6.20	6.34
8						
9						
10						
11						
12						
13						
14	5.93	5.66	5.79	5.53	6.20	6.47
15						
16						
17						
18						
19						
20						
21	5.93	5.53	5.66	5.66	6.34	6.47
22						
23						
24						
25						
26						
27						
28	6.06	5.53	5.66	5.79	6.34	6.61
29						
30		-----				
31		-----		-----		-----

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	6.34	6.90	6.90	7.18	7.18	6.06
2						
3						
4						
5						
6						
7	6.47	6.90	6.90	7.04	7.04	6.34
8						
9						
10						
11						
12						
13						
14	6.47	6.61	7.18	7.04	6.61	6.34
15						
16						
17						
18						
19						
20						
21	6.61	6.90	7.32	7.18	6.06	6.06
22						
23						
24						
25						
26						
27						
28	7.18	6.90	7.18	7.62	5.43	6.34
29						
30						
31			—		—	

Input in
SW36 data entry
5/31/01
mjs

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): Flow is measured at effluent of Simms Fish Farm Pond #1 using a ruler to determine water depth across dam boards. Flow is calculated using discharge tables supplied by IDWR

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:
Beginning diversion date ____/____/____ Ending diversion date ____/____/____
month day month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made to water system

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during the reporting year. Attach drawings, sketches, notes or design information if needed.

N/A

SECTION V Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

CT Simms Co., Inc.
Debra J. Simms, President 1/23/01
Signature Title Date

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of twenty-five dollars (\$25) per diversion made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.

For Department Use Only

Received by J. Mari Date 1-30-01 Time _____
Fee amount submitted \$25.00 Correct? yes ☒ no _____
Receipted by J. Mari Receipt No. 0053079
Reviewed by cyh Date 5-21-01
Data entry by _____ Date _____
Max Div Rate (cfs) 7.62 Date 10-28 Total Vol (acre-feet) _____

WR

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESRcd 1/12/00
IDWR**THIS IS YOUR 1999 WATER MEASUREMENT ANNUAL REPORT****For the Water Measurement Program -
OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE**

ATTENTION: Year end data must be submitted to Idaho Department of Water Resources,
1301 N. Orchard, Boise Idaho 83706, on or before:

January 15, 2000

A separate reporting form must be submitted for each diversion. Refer to page 5 for instructions.

This report form may be used for the following diversion:

Diversion Name or Facility: 06S 13E 35 SESW A0007576
Water Source: SIMMS POND 1 & 2
Water Right(s) Owner or Contact: BIRCH CREEK
(owner name(s) may be omitted if there SIMMS, CLIFFORD J (DECEASED)
are multiple owners on same diversion) BARBARA SIMMS 9

SECTION I Water Right Holder/Operator Information

(If there are multiple water right holders on a common ditch or conveyance system, please designate the contact person below)

Current Water Right OwnerPlease check for address correction ☐Name SIMMS BARBARA J
Last, First, MIPhone 208 837 4537Address 17816 US Hwy 30

Fax _____

City BlissState & Zip ID 83314**Original Owner (if sold within last year)**Name _____
Last, First, MI

Phone _____

Address _____

Fax _____

City _____

State & Zip _____

Operator or Contact PersonName SIMMS BARBARA J
Last, First, MIPhone 208 837 4537Address 17816 US Hwy 30

Fax _____

City Bliss Id 83314State & Zip ID 83314

SECTION II Water Measurement Log (*measurements must be recorded at least once per week and in units of cubic feet per second.*)

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	(5.79)				5.53	6.90
2	↑					
3						
4						
5			↓			
6			0			
7			5.01		6.20	6.90
8						
9						
10						
11						
12						
13		↓				
14	↓	(5.79)			6.34	7.04
15	5.79	0				
16		(0)				
17						
18						
19						
20						
21					6.75	7.18
22						
23						
24				5.53		
25						
26						
27						
28		✓	4.63		6.90	7.18
29		-----				
30		-----				
31		-----		-----		-----

SECTION II Water Measurement Log (Continued). (measurements must be recorded at least once per week and in units of cubic feet per second.)

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	6.90	6.61	6.75	7.47	6.75	6.20
2						
3						
4						
5						
6						
7	6.75	6.61	6.75	7.47	6.75	6.06
8						
9						
10						
11						
12						
13						
14	6.61	6.75	6.90	7.47	6.61	5.93
15						
16						
17						
18						
19						
20						
21	6.75	6.61	7.04	7.04	6.61	6.06
22						
23						
24						
25						
26						
27						
28	6.61	6.61	7.04	6.90	6.47	5.93
29						
30						
31			-----		-----	

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): MEASURING HEAD IN
INCHES OVER DAM BOARDS IN A RECTANGULAR
SUPPRESSED WEIR 3'4" IN LENGTH USING DISCHARGE
TABLE MEASUREMENTS SUPPLIED BY IDWR, WEIRISAT DISCHARGE
FISH POND #1

B. Period of Use: For seasonal or partial year diversion/use, show turn-on (start) and turn-off (end) dates:

Beginning diversion date 1 / 1
 month day

Ending diversion date 12 / 31
 month day

C. Attach copies of all measuring device rating tables to this report (omit if previously supplied to the Department).

SECTION IV Modifications made in 1999

Please describe in the space below any major modification made to the diversion works or measuring device which would affect the accuracy of the flow measurement during 1999. Attach drawings, sketches, notes or design information if needed.

SECTION V Certification

I hereby certify that the information reported is correct to the best of my knowledge and that I recognize that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code.

Barbara J. Simms owner
 Signature Title

1/11/2000
 Date

IMPORTANT: Each reporting form shall be accompanied by a report processing fee in the amount of **twenty-five dollars (\$25) per diversion** made payable to the Idaho Department of Water Resources. (Section 42-701(6), Idaho Code). Fee may be waived if no diversions are made during the reporting year.

For Department Use Only

Received by Sub

Date 1/12/00

Time —

Fee amount submitted \$25

Correct? yes ☒ no ☐

Received by apio Koeck

Receipt No. 7072 CO47721

Data entry by —

Date —

Reviewed by gh

Date 9-8-00

Max Div Rate (cfs) 7.47

Date 10-1-00 Total Vol (acre-feet) —

WR IR

Discharge, Cubic Feet Per Second, Calendar Year 1999

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
02	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
03	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
04	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
05	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
06	5.8	5.8	0.0	4.6	5.5	6.9	6.9	6.6	6.8	7.5	6.8	6.2
07	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
08	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
09	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
10	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
11	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
12	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
13	5.8	5.8	5.0	4.6	6.2	6.9	6.8	6.6	6.8	7.5	6.8	6.1
14	5.8	5.8	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
15	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
16	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
17	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
18	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
19	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
20	5.8	0.0	5.0	4.6	6.3	7.0	6.6	6.8	6.9	7.5	6.6	5.9
21	5.8	0.0	5.0	4.6	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
22	5.8	0.0	5.0	4.6	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
23	5.8	0.0	5.0	4.6	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
24	5.8	0.0	5.0	5.5	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
25	5.8	0.0	5.0	5.5	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
26	5.8	0.0	5.0	5.5	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
27	5.8	0.0	5.0	5.5	6.8	7.2	6.8	6.6	7.0	7.0	6.6	6.1
28	5.8	0.0	4.6	5.5	6.9	7.2	6.6	6.6	7.0	6.9	6.5	5.9
29	5.8		4.6	5.5	6.9	7.2	6.6	6.6	7.0	6.9	6.5	5.9
30	5.8		4.6	5.5	6.9	7.2	6.6	6.6	7.0	6.9	6.5	5.9
31	5.8		4.6		6.9		6.6	6.6		6.9		5.9
Total	179.5	81.06	123.7	145.2	195.8	210.8	208.6	205.9	206.5	226.3	199.7	187.3
Mean	5.8	2.9	4.0	4.8	6.3	7.0	6.7	6.6	6.9	7.3	6.7	6.0
Min	5.8	0.0	0.0	4.6	5.5	6.9	6.6	6.6	6.8	6.9	6.5	5.9
Max	5.8	5.8	5.0	5.5	6.9	7.2	6.9	6.8	7.0	7.5	6.8	6.2
Ac-Ft	356.0	160.8	245.4	288.0	388.4	418.1	413.8	408.4	409.5	448.8	396.1	371.5

Calendar Year 1999 Total Cfs: 2170

Total Ac-Ft: 4305

Diversion Name: SIMMS POND 1 & 2

Water Dist Div. No.: 410114

Discharge, Cubic Feet Per Second, Calendar Year 2000

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
02	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
03	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
04	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
05	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
06	6.1	5.7	5.5	5.8	5.9	6.3	6.3	6.9	6.9	7.2	7.2	6.1
07	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
08	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
09	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
10	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
11	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
12	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
13	6.1	5.5	5.5	5.7	6.2	6.3	6.5	6.9	6.9	7.0	7.0	6.3
14	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
15	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
16	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
17	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
18	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
19	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
20	5.9	5.7	5.8	5.5	6.2	6.5	6.5	6.6	7.2	7.0	6.6	6.3
21	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
22	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
23	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
24	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
25	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
26	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
27	5.9	5.5	5.7	5.7	6.3	6.5	6.6	6.9	7.3	7.2	6.1	6.1
28	6.1	5.5	5.7	5.8	6.3	6.6	7.2	6.9	7.2	7.6	5.9	6.1
29	6.1	5.5	5.7	5.8	6.3	6.6	7.2	6.9	7.2	7.6	5.9	6.3
30	6.1		5.7	5.8	6.3	6.6	7.2	6.9	7.2	7.6	5.9	6.3
31	6.1		5.7		6.3		7.2	6.9		7.6		6.3
Total	186.0	162.1	174.7	170.1	192.1	192.8	203.6	211.9	212.7	222.4	198.8	192.6
Mean	6.0	5.6	5.6	5.7	6.2	6.4	6.6	6.8	7.1	7.2	6.6	6.2
Min	5.9	5.5	5.5	5.5	5.9	6.3	6.3	6.6	6.9	7.0	5.9	6.1
Max	6.1	5.7	5.8	5.8	6.3	6.6	7.2	6.9	7.3	7.6	7.2	6.3
Ac-Ft	369.0	321.4	346.5	337.3	381.1	382.5	403.9	420.2	422.0	441.1	394.4	382.1

Calendar Year 2000 Total Cfs: 2320

Total Ac-Ft: 4601

Diversion Name: SIMMS POND 1 & 2

Water Dist Div. No.: 410114

Discharge, Cubic Feet Per Second, Calendar Year 2001

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
02	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
03	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
04	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
05	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
06	6.1	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9
07	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
08	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
09	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
10	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
11	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
12	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
13	5.9	5.9	5.8	5.3	5.3	5.7	5.9	6.3	6.5	6.2	6.1	5.9
14	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
15	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
16	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
17	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
18	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
19	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
20	5.8	5.9	5.5	5.3	5.5	5.9	5.9	6.6	6.3	6.5	6.1	5.8
21	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
22	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
23	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
24	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
25	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
26	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
27	5.8	6.1	5.4	5.3	5.7	5.9	6.1	6.6	6.2	6.3	5.9	5.8
28	5.9	5.8	5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9	5.9
29	5.9		5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9	5.9
30	5.9		5.3	5.1	5.9	5.7	6.1	6.5	6.1	6.3	5.9	5.9
31	5.9		5.3		5.9		6.1	6.5		6.3		5.9
Total	182.7	166.8	172.9	157.7	169.8	175.2	183.6	199.2	190.1	194.8	182.2	181.9
Mean	5.9	6.0	5.6	5.3	5.5	5.8	5.9	6.4	6.3	6.3	6.1	5.9
Min	5.8	5.8	5.3	5.1	5.1	5.7	5.7	6.1	6.1	6.1	5.9	5.8
Max	6.1	6.1	5.8	5.3	5.9	5.9	6.1	6.6	6.5	6.5	6.3	5.9
Ac-Ft	362.3	330.9	342.9	312.8	336.8	347.5	364.2	395.0	377.0	386.4	361.4	360.7

Calendar Year 2001 Total Cfs: 2157

Total Ac-Ft: 4278



Pond 1 ~~5'8"~~ 3'4"
Range 6"-8" h

Pond 3 ~~6'8"~~ (~~10'~~) 5'9" & 5'10"
Range 2"-6" h

Simms

POND 1 & 2 410114 37-7116

Pond 3 410115 37-7116

Source = Birch CK via pond 3

Irrigation Pump 410106 37-7116, 797 & 12868

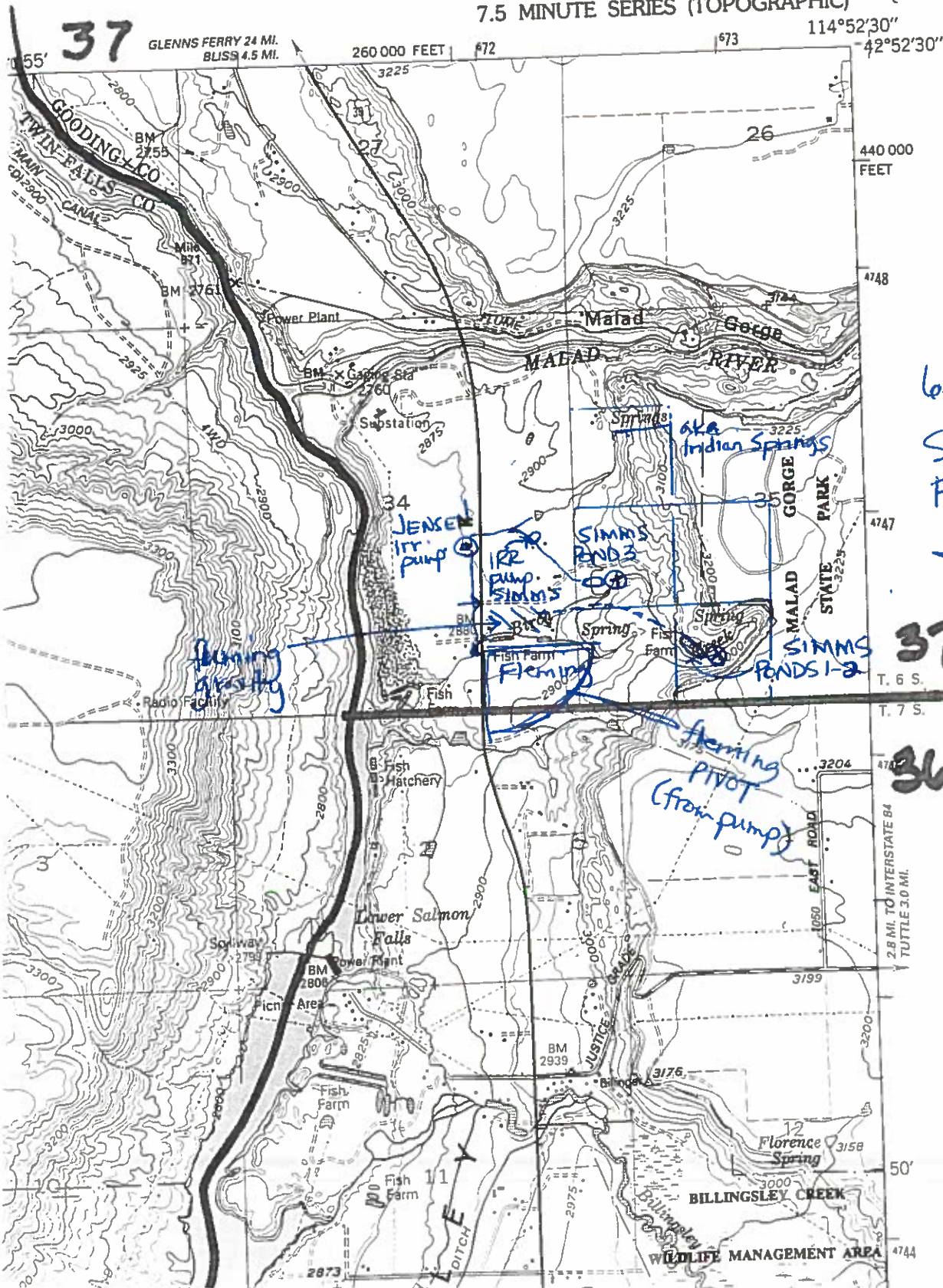
pod should be NENESE Sec 34

Source =
"Indian Creek"

HAGERMAN QUADRANGLE
IDAHO
7.5 MINUTE SERIES (TOPOGRAPHIC)

(GOODING BUTTE)

4319



6S 13E 35 & 34
SIMMS
FLEMING
JENSEN

37

36

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
Water Measurement Program

WATER MEASURING DEVICE CERTIFICATION
FOR OPEN CHANNEL MEASUREMENT
(For Department Use Only)

Diversion Name or Facility: Simms Pond 1

Water Source: Birch Creek

Water Right(s) Owner: Barbara Simms

(owner name(s) may be omitted if there
are multiple owners on same diversion)

WDO

Current Owner

Name Simms, Barbara
Last, First, MI

Phone 837-4537

Address 17816 Hwy 30 City BLISS State ID Zip 83314

~~Operator~~ ^{Contract} (if leased or operated by someone else)

Name Jeff
Last, First, MI

Phone 837-4537

Address _____ City _____ State _____ Zip _____

Description of Open Channel Measuring Device or Rated Section:

flat crested weir formed by dam boards in concrete
retaining structure at outlet of fish pond. Crest
length 3'4". Head Suppressed Rectangular weir
formula used.

Description of method and equipment used to perform calibration measurement:

Swaffer current meter - used in diversion ditch
above pond (see notes attached)

Date of IDWR Calibration 5-26-99

Measurement No. 1 (M_1) is the measured rate of flow from the installed measuring device.

Measurement No. 2 (M_2) is the measured rate of flow from the measuring device being used to check the flow for the calibration.

Measurement No. 1 (M_1) 6.47 GPM or CFS (circle one)

Measurement No. 2 (M_2) 6.57 GPM or CFS (circle one)

Percent Difference = $(M_1 - M_2) \div M_2 \times 100 = \pm \%$

Percent Difference = $[(\underline{6.47} (M_1) - \underline{6.57} (M_2)) \div \underline{6.57} (M_2) \times 100 = \underline{-1.5} \%$
(If error is greater than $\pm 10\%$ see instructions for this form)

Comments: Good measurement. This site has been selected
as a monitoring site for USGS/WI study.

→ Attach all field notes, discharge measurement notes etc.

I certify that the above information is true and correct to the best of my knowledge and ability and the measurements taken and recorded are in accordance with the standards and specifications of the equipment used.

Signature Cindy J. Hodges
(person performing measurements)

Date 5-27-99

For Department Use Only

Received by _____ Date _____

Reviewed by _____ Date _____

Data Entry by _____ Date _____

Water Right No.
(if applicable)

A. GENERAL INFORMATION

1. Name of stream or ditch: Spring Birch Creek .92
2. Location: Simms Pond 1 (head of creek) in diversion ditch .92
3. Person conducting measurement: C. Hodges .94
4. Date and time of measurement: 5-26-99 14:15 .94
5. Accompanied by: — .96
6. Measuring device size and ID no.: Swiffer .96
7. Spin test before measurement OK? Y ~~E~~ * after measurement OK? Y ~~E~~ * .97
8. Purpose of measurement: WMD ~~exclusion~~ & device calibration .98

B. MEASUREMENT DATA

- * Spin counts low but velocity high enough to overcome any problems

[illegible]

C. DIAGRAMS

1. Measurement Location

Scale: _____ = _____

2. Cross-Section of Measurement

Scale _____ = _____

D. SUMMARY INFORMATION

1. Measurement rated _____ excellent ☒ good _____ fair _____ poor

2. Remarks: Channel bottom somewhat soft

3. Width: 8.5 Area: _____ Discharge in cubic feet per second: _____

5-26-99
DATE

Cindy J. Hodges
SIGNATURE OF PERSON CONDUCTING MEASUREMENT



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

May 27, 1999

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

BARBARA SIMMS
17816 HWY 30
BLISS ID 83314

RE: Discharge tables, Ponds 1 and 3

Dear Barbara:

Enclosed are modified tables for measurements at Ponds 1 and 3. I have changed both the previous ratings and added a third, so please discard the pages sent earlier and use these updated versions.

For Pond 1, I have adjusted the crest length of the weir, as I found the weir opening to measure 3'4" rather than 3'8". I was able to make a calibration measurement in the diversion ditch above the pond yesterday and found very good correlation between my measurement and the weir measurement using the modified table. If Jeff has entered any measurements using the old table he will want to adjust them to the new figures.

At Pond 3, I measured the two outlet openings and found that the actual widths vary slightly, so I created a discharge table for each opening. The *north* opening, or the one closest to the road, measured 5'10" while the *south* opening measured 5'9". While this is a fairly minor discrepancy, a better measurement will be obtained if the discharge tables are specific to the weirs involved. Each weir should be measured separately even if the crest lengths are similar because of possible head differences due to irregular board widths. The results may be summed for a single discharge value in the weekly report, so long as you keep the individual field data in your records.

I also attached IDWR site identification tags near each pond diversion. The purpose of the site tag is to provide a unique identification number for each measurement location. The tag at Pond 1 is banded to a metal post near the weir. The tag at Pond 3 is nailed to a locust tree near the road. If the location of either of these tags is inconvenient for you, or if you find it necessary to relocate the tag in the future, please notify me.

Thanks again for your assistance and cooperation.

Sincerely,

Cindy Hodges
Sr. Water Resource Agent
Water Distribution Section

enclosures



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

April 12, 1999

BARBARA SIMMS
17816 HIGHWAY 30
BLISS ID 83314

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

RE: *Petition for Exclusion from a Water Measurement District*

Dear Barbara:

Your petition for exclusion from the ESPA West Water Measurement District (WMD) was received on 12/23/98. Based on information I collected this past week during my field inventory, your petition has been reviewed and **ACCEPTED** for the following point(s) of diversion:

T06S R13E S35 NWSW & SESW Birch Creek A37-07116

Measurements are to be taken over the check dam at the lower end of Pond 1 and at the double check dam at the lower end of pond 3, above the settling pool. As an alternative, a weir or single dam may be installed at the end of the pond 3 settling pool for measurement of that location. Discharge tables for *rectangular suppressed weirs* are required for use with check dams.

At this time, you will not be required to measure and report diversions from your irrigation pump, because you are pumping only flows which have already been measured at Pond 3. In the future, it may be necessary to more precisely quantify all consumptive uses, including irrigation. In that event, you will be contacted by the West Water Measurement District regarding your irrigation pump.

Enclosed with this acceptance letter are 1999 Water Measurement Annual Reporting Forms for all measurement locations. Please begin measuring and recording your readings immediately, or as soon as measuring devices are installed. Report forms must contain **weekly flow measurements** from weir or other non-totalizing devices. As promised, I have also prepared and enclosed discharge tables specific to the above two locations. If you have any further questions about weir measurement or the use of the tables, please don't hesitate to call.

4/12/1999

page 2

Annual reports for 1999 will be due by January 15, 2000 along with a \$25.00 per diversion reporting fee. If no diversion occurs from a particular point of diversion in any year, an annual report form must be submitted but no fee is required for that report.

I have also included a Notice of Change in Ownership form which you may use to change ownership of your water right claims to that of the family Trust, showing yourself as Trustee. You may use this form for all affected water rights. Questions regarding change in ownership should be directed to IDWR's Southern Region office in Twin Falls (see back of form for address and phone).

Thank you again for your cooperation and diligence in submitting information. It has been a pleasure working with you and Jeff. Please contact me at 208-327-5406 if you have questions or need further information.

Sincerely,



Cindy Hodges
Sr. Water Resource Agent
Water Distribution Section

Enclosures

5-26-98

1330

Simms -

Attached site tags

Pond ~~2~~ 3 - nailed to tree, near diversion ditch @ head

Pond 1 - Board length 3' 4" (3.32') change this too!
Head .7' ~~6.48~~ 6.47 cfs

Site tag banded to metal post near weir (between
2 ponds 1 & 2)

Current meter measure = 6.57 OK

→ Pond 3 crest lengths (NEW)

RHS (ROAD SIDE) 5' 10"

LHS (FIELD SIDE) 5' 9"

Change

4-9-99

IPC Malad River Project w/ Pat Vidmar 9:30
Inventory/Calibration of upper & lower flumes

~~1230 Added tag A0007575 to Turkey Spgs
div (IPC0) on start to tank~~

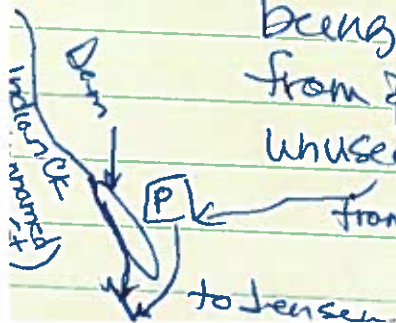
2:00 Simms - Upper ponds - series of
2 - meas btwn @ board - 3'8", use
Suppress. formula GPS - No good tag site

Pond 3 - 2, ~6' boards at end of pond
alt: 1, ~5' board at end of settling pond
(No site tag)

↓
flaming. pump
divs.

Pump - 50 HP centrif - off pond 3 outflow -
Do not meas at this time

(Indian Creek diversion is not
being used) - flows dammed away
from pump, flow to Jensen w/
unused Birch Creek water



RECEIVED

DEC 23 1998

IDAHO DEPARTMENT OF WATER RESOURCES
PO BOX 83720
BOISE ID 83720-0098

Department of Water Resources

RE: Petition for Exclusion from Water Measurement District and Agreement to Provide Annual Report of Diversions

NOTICE: Return on or before December 21, 1998

BARBARA SIMMS respectfully submits this petition for exclusion from the West Water Measurement District pursuant to the aquaculture exemption provision in Section 42-706(1), Idaho Code.

BARBARA SIMMS hereby agrees to report water measurements annually to the Idaho Department of Water Resources. BARBARA SIMMS also agrees to pay the annual \$25.00 per diversion reporting fee under Section 42-701(6), Idaho Code at the time the annual report is due to the Department.

BARBARA SIMMS further agrees to submit an addendum of information in a timely fashion as specified by the Department, which contains sufficient information about the diversion system(s) as requested by the Department. BARBARA SIMMS agrees to allow the Department to periodically review its measurement devices and/or method of measurement, and to measure and report diversions in a manner acceptable to the Department, and in accordance with Department recommendations and guidelines for measurement and reporting of diversions.

WATER USER

Barbara J. Simms
(signature)

12/21/98
DATE

BARBARA J. SIMMS, Trustee CJ Simms Family Trust
(print name and title)

Simms Credit Shelter Trust
Pres. C.J. Simms Co., Inc.

Petition applies to these water right numbers:

A37-07116

A37-00797

A37-12868



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, P.O. Box 83720, Boise, Idaho 83720-0098

Phone: (208) 327-7900 FAX: (208) 327-7866

December 1, 1998

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

BARBARA SIMMS
17816 HWY 30
BLISS ID 83314

Is sending petition

RE: **Notice of 1999 Water Measurement and Reporting Requirement**
Petition for Exclusion from Water Measurement District

Dear Water User:

Our records show that you are the owner or operator of a surface water diversion in the Eastern Snake Plain Aquifer (ESPA). Your diversion(s) will be subject to measurement and annual reporting requirements beginning next year. As you may know, the department created a water measurement district in your area in October 1996 for the purpose of coordinating and assisting with the measurement requirement. Copies of the order were sent to all water right holders of record at that date. If you did not receive a copy, please contact this office. The measurement district (map attached) includes both ground water and surface water diversions. However, if you have other diversions regulated by an active state watermaster, they will not be included in the water measurement district.

The department's order of October 1996, and Idaho Code allows holders of water rights for fish propagation or power generation purposes to petition for exclusion from water measurement districts provided that they measure their diversions and report measurements in a manner acceptable to the director of the department and in accordance with the law. Section 42-706, Idaho Code, provides as follows, in part:

Appropriators or users of water for hydropower, instream flow, aquaculture purposes..may petition to be excluded from the water measurement district at the time the water measurement district is created or modified, or a later time, upon a showing to the satisfaction of the director that they are currently making and recording sufficient measurements of their diversions with measuring methods acceptable to the director and upon their agreement to provide an annual report of their diversions to the director in substantially the same form as required in Section 42-708, Idaho Code.

Based on IDWR water right records, the following diversions will be required to be measured:

Point of Diversion	Water Right	Source	Diversion Name
06S 13E 35 SESW	A37-07116	BIRCH CREEK	
06S 13E 35 SWNWSW	A37-07116	BIRCH CREEK	
06S 13E 35 NWSWNW	A37-00797	BIRCH CREEK	

Some or all of the water uses from the above diversions are for aquaculture or hydropower purposes and may be eligible for the exclusion from the West Measurement District. The purpose of this letter is to notify you that a petition for exclusion must be filed with the department immediately if you are interested in an exclusion beginning in 1999. You must file a formal petition for your exclusion to be considered.

Water rights for irrigation or other uses which are associated with a hydropower or fishery facility might also be eligible for exclusion from the water measurement district, provided that the associated rights are diverted through a common system and total flows are able to be measured along with the larger use. If associated water rights are found to use a separate system from the qualifying hydropower or fishery uses, they will be included on the Water Measurement District assessment list for 1999 and required to be measured separately.

For your convenience, the attached form letter may be used to formally petition for an exclusion from the measurement district. By executing the form letter, you agree to provide an annual report of your diversions directly to the Department of Water Resources and pay an annual reporting fee of \$25.00 per diversion. You further agree to allow department staff to periodically review your measuring devices and measurement methodology, and follow IDWR recommendations or guidelines regarding measurement and reporting.

Enclosed for your information are IDWR Interim Guidelines for collecting and reporting water measurement data, and for excluding certain water users from water measurement districts. The guidelines contain more information about Water Measurement Districts, reporting requirements and standards, and allowable exclusions. Please review the material carefully.

If you do not wish to pursue your exclusion option, you need not return the petition. You will be assessed annually by the West Water Measurement District beginning in 1999. The District assessment will include a flat charge of \$25.00 per diversion, plus a pro-rata charge of \$31.52 per cfs, based upon the claimed diversion rate for each water right. The District Hydrographer will be able to assist you with your measurement plan. If you are a District member, your reports will be filed directly with Hydrographer and you will not pay a yearly filing fee.

The West Water Measurement District's annual meeting will be held Monday, December 14. A copy of a meeting notice is attached. I would encourage you to attend this meeting if you have questions regarding participation versus exclusion from the Water Measurement District.

The attached exclusion petition and agreement form letter must be signed and returned to the Department on or before December 21, 1998. Additional information will be requested after that time if necessary. If your petition is not received by this date, you may receive an assessment from the West Water Measurement District for 1999.

If you pursue your exclusion option and are approved, 1999 reporting forms will be mailed to you.

If you have questions regarding this matter, please contact me directly at 208-327-5406. You may also contact our Southern Region Office in Twin Falls at 208-736-3033 for more information regarding the West Water Measurement District.

Sincerely,


Cindy Hodges
Sr. Water Resource Agent
Water Distribution Section

Enclosures

cc: IDWR Southern Region Office