

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.**

*Date Entry
closed 3/16/17*

Reporter ID/Name:	BOB JONES	
Water Source:	AWALT HAGERMAN RANCH - ROBT JONES REALTY	
Legal Description:	T 06S 13E S35 SWNWSW	1/4 1/4
Site Tag No:	BIRCH CK POND 3	
Diversion Name:	A0007577 410115	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
Address PO Box 392

or Bob Jones Realty @
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
Address 2775 S. 1050 E.

Fax 208-837-4808

City Hagerman

Mobile 208-280-4808

State & Zip ID 83332

e-mail glemmon@northrim.net

SECTION II Water Use Information

Crop	Acres
_____	_____
_____	_____
_____	_____
Total acres	_____

Non-Irrigation Use(s)

Fish

Number of idled acres _____

Total AC- FT- 1791

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					1.30	
2						2.43
3	2.04			2.50		
4						
5						
6		1.90	1.49			
7						
8					2.72	
9						
10	1.90			2.50		
11						
12						3.03
13		1.49	0.88			
14						
15					1.87	
16						2.43
17	1.90		1.00	1.90		
18						
19						
20		1.49				
21						
22					1.87	
23						
24	2.04			1.62		
25						
26						
27		1.49	0.88			
28						
29						
30		-----				2.43
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	3.91					2.43
3				3.76		
4			3.68			
5						
6					2.43	
7	3.45	3.03				
8						
9				3.76		
10						
11			3.68			
12					2.43	2.43
13		3.03				
14						
15	3.45					
16						
17						
18			4.02	3.03		
19						2.43
20					2.43	
21		3.76				
22						
23						
24						
25			4.37			
26				2.43		2.43
27					2.43	
28		3.35				
29						
30						
31			-----		-----	

SECTION IV Measuring Device Information

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

70" 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.

Mid June 2015:

Changed check boards along ditch to get more water.

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 8/17/16

RECEIVED

JAN 20 2015

DEPT OF WATER RESOURCE
SOUTHERN REGIONRater Entered
4/15/15
CokeSTATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORTREPORTING YEAR 2014OPEN 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 JONES REALTY	
Legal Description:	T 06S 13E S35 SWWSW	1/4 1/4
Site Tag No:	BIRCH CK POND 3	
Diversion Name:	A0007577 410115 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

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

Please check for address correction ☒

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 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	2.98 est					
2					2.66	
3	3.15					
4				2.04		
5						
6						2.82
7		2.50	2.19			
8						
9					2.58	
10	3.15					
11				1.90		
12						
13						2.66
14		2.50	2.04			
15						
16					2.82	
17	2.50					
18				3.32		
19						
20						4.21
21		2.50	2.19			
22						
23					3.85	
24	2.66					2.98
25			2.19	3.49		
26						
27						
28		2.34				
29						
30		-----				
31	2.66	-----		-----		-----

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		2.58				
2						
3				3.85		
4	2.98					
5			3.32			2.50
6						
7					2.98	
8		2.82				
9						
10				4.21		
11	2.66					
12			3.67			2.50
13						
14					2.82	
15		3.15				2.04
16						
17				3.85		
18	2.66					
19			3.49			
20						
21					2.82	
22		3.49				
23						
24				3.15		
25	2.90					
26			3.49			2.04
27						
28					2.82	
29		3.85				
30						
31			—	3.49	—	

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).

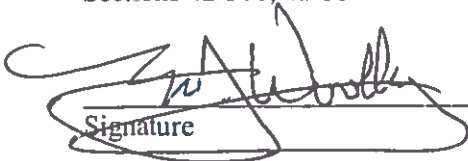
SECTION V Modifications made to water system

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

TNC IDAHO FARMS
MANAGER
Title

1/15/15
Date

Reviewed by N. Erickson
Data entry by Chloe

For Department Use Only

Date 4/15/15
Date 4/15/15

RECEIVED

JAN 10 2013

DEPT. OF WATER RESOURCES
SOUTHERN REGION

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2012

*Data
corrected
4/15/13*

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 SWNWSW	
Legal Description:	BIRCH CK POND 3	
	A0007577 410115	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, CHERSTY, L.

Phone (208) 733-0101

Address P.O. BOX 392

Fax _____

City SAN MIGUEL

Mobile _____

State & Zip CA. 93451

e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.

Phone (208) 326-7213

Address 4452 NORTH 2000 EAST

Fax _____

City FOLEB

Mobile (208) 243-0733

State & Zip ID. 83328

e-mail MJWOOLLEY@CABUKONK.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 _____

2.82

OK

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		2.82	2.82			
4					4.21	
5						
6	2.82			2.98		
7						4.59
8						
9			2.82			
10		2.82				
11					4.21	
12						
13	2.82			2.82		
14						
15						4.21
16			2.82			
17		2.82				
18					3.49	
19						
20	3.15			2.82		
21						
22						4.21
23			2.82			
24		2.82				
25					3.32	
26						
27	2.82			2.98		
28						
29						3.49
30		-----	2.98			
31		-----		-----	4.78	-----

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					3.85	
3		5.37				
4						
5				5.37		
6	3.85					
7			4.59			2.66
8						
9					3.49	
10		4.78	4.40			
11						
12				4.59		
13	4.21					
14						2.50
15						
16					3.67	
17		4.40				
18						
19				4.21		
20	4.98					
21			4.78			3.06
22						
23					3.49	
24		7.06				
25						
26				3.85		
27	10.2					
28			4.59			3.15
29						
30					3.06	
31		5.37	—		—	

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

1/8/2013
Date

For Department Use Only

Reviewed by Cotter
Data entry by Cotter

Date 1/5/13
Date 1/5/13

Data Entry

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 SWNW SW	
Legal Description:	BIRCH CK POND 3	
	T A0007577 410115	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, CRESTY, L.

Phone (208) 733-0404

Last, First, MI

Address P.O. BOX 392

Fax _____

City SAN MIGUEL

Mobile _____

State & Zip CA. 93451

e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.

Phone (208) 326-7213

Last, First, MI

Address 4452 NORTH 2000 EAST

Fax _____

City TELEF

Mobile (208) 243-0733

State & Zip ID. 83328

e-mail MJWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop

Acres

Non-Irrigation Use(s)

None

None

AQUACULTURE

Total acres

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				2.82		
2						
3						
4		2.98	3.15			5.37
5						
6					2.82	
7	3.06					
8				2.82		
9						
10						4.21
11		2.98	3.32			
12						
13					3.85	
14	3.15					
15				2.82		
16						
17						6.04
18		2.98	3.15			
19						
20					3.85	
21	3.15					
22				2.82		
23						4.21
24			2.82			
25		3.15				
26						
27					4.21	
28	3.15					
29				3.85		
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	3.85					
2			4.03			3.15
3						
4					4.21	
5		4.21				
6						
7				6.41		
8	3.49					
9			4.21			3.15
10						
11					3.85	
12		4.21				
13						
14				4.21		
15	4.40					
16			4.49			2.98
17						
18					3.85	
19		4.59				
20						
21			5.37	7.97		
22	4.78					
23						2.82
24						
25					3.49	
26		4.40				
27						
28				4.59		2.82
29	4.21					
30			6.63			
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

1/10/2012
Date

For Department Use Only

Reviewed by _____
Data entry by C. Hest

Date _____
Date 4/6/12

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2010

RECEIVED
JAN 14 2011
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, 2011.

Reporter ID/Name:	MAX WOOLLEY	
Water Source:	AWALT HAGERMAN RANCH	
Legal Description:	T 06S 13E S35 SES	4 1/4
Site Tag No:	BIRCH CK PONDS 3	
Diversion Name:	A0007576 410114	9

A0007577 410115

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, CRESTY, L.

Phone (208) 733-0404

Address P.O. BOX 392

Fax _____

City SAN MIGUEL

Mobile _____

State & Zip CA. 93451

e-mail _____

Operator or Contact Person (if different from owner)

Name WOOLLEY, MAX, J.

Phone (208) 326-7213

Address 4452 NORTH 2000 EAST

Fax _____

City FILER

Mobile (208) 243-0733

State & Zip ID. 83328

e-mail MJWOOLLEY@CABLEONE.NET

SECTION II Water Use Information

Crop

Acres

None

None

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						
2				3.15		
3						
4	2.90					5.05
5		2.75	2.75			
6						
7					3.56	
8						
9				3.19		
10						
11						5.67
12		2.82	2.82			
13						
14					3.99	
15	2.75					
16				3.15		
17						
18						4.02
19		2.97	3.12			
20						
21					4.29	
22	3.12					
23				3.19		
24						
25						3.99
26		2.62	3.12			
27						
28					5.34	
29	2.90					
30		-----		3.47		
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	4.12					
3			5.05			3.23
4						
5					3.32	
6		3.85				
7						
8				3.85		
9	4.18					
10			5.05			3.15
11						
12					3.49	
13		4.18				
14						
15				3.56		
16	3.85					
17			4.29			3.15
18						
19					3.15	
20		5.05				
21						
22				3.56		
23	3.85					3.49
24						
25						
26					3.15	
27		5.67				
28				3.32		
29			5.34			
30	3.56					2.90
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).

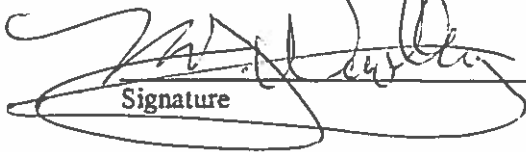
SECTION V Modifications made to water system

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 _____
Data entry by Ala

Date _____
Date 2/18/11

RECEIVED

JAN 19 2010

DEPT. OF WATER RESOURCES
SOUTHERN REGION

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

REPORTING YEAR 2009

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 SWN	_____ 1/4
Site Tag No:	_____	BIRCH CK POND 3	_____
Diversion Name:	_____	A0007577 410115	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 Auxit, Christy L
Last, First, MI
Address P.O. Box 312
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. 1700 S
City Gooding
State & Zip ID 83330

Phone 208-934-5831
Fax _____
Mobile 208-280-0308
e-mail Jonesaeg.com

SECTION II Water Use Information

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

Non-Irrigation Use(s)

none

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					1.84	
2	1.84 1.84					
3				1.84		
4						
5						1.98
6		1.84	1.84			
7						
8					1.84	
9	1.84 1.84					
10				1.84		
11						
12						2.11
13		1.84	1.84			
14						
15					1.84	
16	1.84					
17				1.84		
18						
19						1.84
20		1.84	1.84			
21						
22					1.98	
23	1.84					
24						
25						
26						2.11
27		1.84	1.84	1.71		
28						
29					2.11	
30	1.84	-----				
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	1.98			3.30		
3						
4			3.30	3.30		3.15
5						
6					3.63	
7		3.15				
8						
9				3.30		
10	1.98					
11			3.30	3.30		2.99
12						
13					3.80	
14		3.30				
15						
16				3.30		
17	2.11					
18			3.30	3.30		2.99
19						
20					3.47	
21		3.30				
22						
23				3.30		
24	2.99					2.84
25			3.30	3.30		
26						
27					3.30	
28		3.30				
29						
30				3.30		
31	2.99		-----		-----	

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.

Angeli Jmr
Signature

Reporter
Title

1/14/2010
Date

For Department Use Only

Reviewed by CEA
Data entry by

Date
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 34 NWSE		
Legal Description:	T BIRCH CK POND 3		
	A0007577 410115	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 Auxalt Christy L

Phone 208-733-0404

Address PO Box 392

Fax _____

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

Address 1828 E 1700S

Fax _____

City Gooding

Mobile 208-280-0308

State & Zip ID 83330

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. al, use estimat. flag
thru 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	1.84	1.84				
2					3.85	
3						
4				1.34		
5						
6						3.96
7						
8						
9					2.43	
10						
11				1.84		
12						
13						3.15
14						
15						
16					2.43	
17						
18				3.33		
19			1.84			
20						4.84
21						
22						
23					3.96	
24						
25				2.43		
26						
27						5.4
28			1.84			
29						
30		-----			4.84	
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		2.99				
3						
4	7.39			1.36		
5						1.84
6			1.36			
7						
8						
9						
10		1.84		1.36		
11						
12	5.28		1.36			1.84
13						
14						
15						
16						
17		1.84		3.85		
18						
19			1.36			1.84
20	2.99					
21					2.99	
22						
23						1.84
24		1.36		3.85		
25						
26			1.36			
27	2.99					
28					2.54	
29						
30						
31		1.36	-----	4.02	-----	

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.

Angelo Jmr
Signature

Reporter
Title

1/31/09
Date

For Department Use Only

Reviewed by _____
Data entry by CHe

Date _____
Date 5/1/09

NTD1:12/00

STATE OF IDAHO
RECEIVED DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT
JAN 12 2006

Department of Water Resources
 Southern Region

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	410115	
Water Right No:	BARBARA SIMMS		
Legal Description:	T	06S 13E 35 SWNWSW	
		A0007577	
Site Tag No:		SIMMS POND 3	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 US 30
 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						
2						
3						
4						
5						
6						
7	3.85	4.11	0	0	0	0
8		0 off				
9						
10						
11						
12						
13						
14	4.11	0	0	0	0	0
15						
16						
17						
18						
19						
20						0
21	4.11	0	0	0	0	4.39
22						
23						
24						
25						
26						
27						
28	4.11	0	0	0	0	4.39
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	4.54	4.54	4.68	5.57	4.97	4.67
8						
9						
10						
11						
12						
13						
14	4.54	4.54	4.68	5.57	4.97	4.67
15						
16						
17						
18						
19						
20						
21	4.39	5.13	4.68	5.57	4.97	0
22						
23						
24						
25						
26						
27						
28	4.54	5.13	5.27	4.97	4.67	0
29						
30						
31			-----		-----	

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): flow measured AT Effluent Simms Pond 3. 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 owner
Signature Title

1/12/06
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 Chia

Date 1-13-06

Time _____

Fee amount submitted 2500

Correct? yes ____ no ____

Received by Chia

Receipt No. 5028289

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 2004

RECEIVED

JAN 14 2005

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:			
Water Source:	41725	410115	
Water Right No:	BIRCH CREEK		
Legal Description:	T 06S 13E 35 SWNW SW		
	A0007577		3 3
Site Tag No:	SIMMS POND 3	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 US 30
City Bliss ID
State & Zip 83314

Phone 833 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	0					
2	↓					
3						
4						
5						
6		0				
7	N/A	<u>4.28</u>	4.28	4.28	3.72	4.41
8						
9						
10						
11						
12						
13						
14	N/A	4.41	4.28	3.86	3.72	4.41
15						
16						
17						
18						
19						
20						
21	N/A	4.28	4.28	3.86	4.12	4.41
22						
23						
24						
25						
26						
27						
28	N/A	4.28	4.28	3.86	4.54	4.41
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	4.12	N/A	4.68	4.39	4.25	4.53
8	OFF					
9						
10						
11						
12						
13						
14	N/A	4.25	4.82	4.39	4.25	4.11
15		ON				
16						
17						
18						
19						
20						
21	N/A	4.68	4.82	3.98	4.11	4.11
22						
23						
24						
25						
26						
27						
28	N/A	4.68	4.54	3.98	4.39	4.11
29						
30						
31			-----		-----	

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): Flow measured AT effluent
Simms Pond 3. 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.

Debra 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 Ch

Date 1-14-05

Time _____

Fee amount submitted 2500

Correct? yes no

Received by Ch

Receipt No. 5027296

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	410115
Water Source:	BARBARA SIMMS	
Water Right No:	06S 13E 35 SWNWSW	
Legal Description:	A0007577	
Site Tag No:	SIMMS POND 3	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 837 4537

Last, First, MI

Address 17816 US 30

Fax _____

City Bliss

Mobile _____

State & Zip ID 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 _____

RECEIVED

JAN 13 2004

MAY 25 2004

Department of Water Resources
Southern Region

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 (e)					
2	interpolate					
3						
4						
5						
6						
7	3.98	4.12	○	○	○	○
8						
9						
10						
11						
12						
13						
14	4.12	4.12	○	○	○	○
15						
16						
17						
18						
19						
20		Begin NO				
21	4.12	Diversion	○	○	○	○
22		○				
23						
24						
25						
26						
27						
28		○	○	○	○	○
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	0	3.72	3.85	4.68	5.12	4.39
8						
9						
10						
11						
12						
13						
14	0	3.72	3.85	5.56	5.12	4.39
15						
16						
17						
18						
19						
20						
21	0	3.72	4.11	5.12	4.67	0
22						
23						
24						
25	Reservoir					
26						
27						
28	3.72	3.85	4.11	5.12	4.39	0
29						
30						
31			—		—	

RECEIVED

JAN 13 2004

1683

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured AT EFFICIENT SIMMSPOND 3. WATER DEPTH MEASURED ACROSS DAM BOARDS FLOW CALCULATION
USING IDWR Discharge TableB. 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 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.Signature Barbara J. Simms Title President
C.J. Simms Co., Inc.Date 01/09/04**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 2500

Correct? yes ____ no ____

Received by CHReceipt No. 5026392Reviewed by RSDate 4-26-04

Data entry by _____

Date _____

Max Div Rate (cfs) 5.56Date 04/26/04 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	410115
Water Source:	BARBARA SIMMS	
Water Right No:	06S 13E 35 SWNWSW	
Legal Description:	A0007577	
Site Tag No:	SIMMS POND 3	
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 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 _____

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	3.98	4.12	0	0	0	0
8						
9						
10						
11						
12						
13						
14	4.12	4.12	0	0	0	0
15						
16						
17						
18						
19						
20		Begin NO				
21	4.12	Diverson	0	0	0	0
22		0				
23						
24						
25						
26						
27						
28		0	0	0	0	0
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	0	3.72	3.85	4.68	5.12	4.39
8						
9						
10						
11						
12						
13						
14	0	3.72	3.85	5.56	5.12	4.39
15						
16						
17						
18						
19						
20						
21	0	3.72	4.11	5.12	4.67	0
22						
23						
24						
25	Resin Diversion					
26						
27						
28	3.72	3.85	4.11	5.12	4.39	0
29						
30						
31			—		—	RECEIVED

JAN 13 2004

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow measured at Efficient SIMMSPOND 3, WATER DEPTH MEASURED ACROSS Dam BOARDS flow calculation
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.Signature Barbara J. Simon Title President
C.J. Simon Co., Inc.Date 01/09/04**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 2500

Correct? yes _____ no _____

Receipted by CHReceipt 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	410115
Water Source:	BARBARA SIMMS	
Water Right No:	BIRCH CREEK	
Legal Description:	06S 13E 35 SWNW SW	
Site Tag No:	A0007577	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 30

Fax _____

City Bliss

Mobile _____

State & Zip ID 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						
2						
3						
4						
5						
6						
7	4.11	3.98	3.98	3.72	4.11	4.11
8						
9						
10						
11						
12						
13						
14	3.85	4.25	3.85	3.72	4.11	4.25
15						
16						
17						
18						
19						
20						
21	3.85	4.25	3.85	3.85	3.85	3.85
22						
23						
24						
25						
26						
27	3.98	3.85	3.85	3.85	4.11	3.98
28						
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	3.98	3.45	3.85	4.25	4.39	4.97
8						
9						
10						
11						
12						
13						
14	3.98	3.45	3.85	4.39	4.39	4.97
15						
16						
17						
18						
19						
20						
21	3.72	3.58	4.25	4.39	4.67	
22						
23						
24						
25						
26						
27	3.72	3.85	4.25	4.11	4.67	5.26
28						
29						
30						
31			-----		-----	

b5b6

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): flow measured at effluent SinnisPond 3. 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.

Signature

Trustee
Sinnis Family
Trust

Title

01/10/03

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 no Receipted 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

RECEIVED

JAN 15 2002

Department of Water Resources

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	410115
Water Source:	BARBARA SIMMS	
Water Right No:	BIRCH CREEK	
Legal Description:	06S 13E 35 SWNWSW	
Site Tag No:	A0007577	
	SIMMS POND 3	
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 OwnerPlease check for address correction ☐

Name SIMMS BARBARA J
 Last, First, MI
 Address 17816 US 30
 City Bliss ID
 State & Zip 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	↑ 4.53		4.53		3.72	
2	4.53					
3						
4						
5						
6						
7	4.53	4.53	4.53	4.25	3.85	3.85
8						
9						
10						
11						
12						
13						
14	4.82	4.53	4.53	4.25	3.85	3.85
15						
16						
17						
18						
19						
20						
21	4.82	4.53	4.25	4.01	4.11	N/A
22						
23						
24						
25						
26						
27						
28	4.97	4.53	4.25	4.01	4.11	3.19
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	3.72	4.25	5.26	4.53	4.82	4.53
8						
9						
10						
11						
12						
13						
14	3.98	4.82	4.97	4.53	4.53	4.11
15						
16						
17						
18						
19						
20						
21	3.85	4.97	4.82	4.82	4.82	4.11
22						
23						
24						
25						
26						
27						
28	4.11	5.41	4.53	4.53	4.53	4.53
29						
30						
31			—		—	

2/8/00

2/8/00

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): Flow measured in inches OUPR (An
boards at Effluent Pond 3. 1 measurement taken at each weir + totals are
summed). Flows calculated using IDWR Tables

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.

Signature _____ 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.

For Department Use Only

Received by J. Mann Date 1-15-02 Time 2:38
 Fee amount submitted 25.00 Correct? yes ☒ no ☐
 Receipted by J. Mann Receipt No. 0059189
 Reviewed by _____ Date _____
 Data entry by [Signature] Date 1/25/02
 Max Div Rate (cfs) _____ Date _____ Total Vol (acre-feet) _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WATER MEASUREMENT ANNUAL REPORT

RECEIVED

JAN 29 2001

Department of Water Resources

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:	BIRCH CREEK	BARBARA SIMMS
Water Right No:		
Legal Description:	06S 13E 35 SWNW SW A0007577	410115
Site Tag No:	SIMMS POND 3	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 OwnerPlease check for address correction ☐Name SIMMS BARBARA J

Phone _____

Last, First, MI

Address 17816 US Hwy 30

Fax _____

City Bliss

Mobile _____

State & Zip ID 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	4.61	4.11	3.98	4.11	4.53	4.67
2	↑					
3						
4						
5						
6						
7	4.67	4.11	3.98	4.11	4.97	4.67
8						
9						
10						
11						
12						
13						
14	4.11	4.11	4.39	4.39	5.57	4.25
15						
16						
17						
18						
19						
20						
21	4.11	3.98	4.25	3.72	5.57	4.25
22						
23						
24						
25						
26						
27						
28	4.53	3.98	4.25	4.11	4.97	3.59
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	3.59	3.98	3.99	4.53	4.97	0
2						
3						
4						
5						
6						
7	3.59	3.72	3.99	4.53	4.67	0
8						
9						
10						
11						
12						
13						
14	3.99	3.99	4.26	5.12	0	4.39
15						
16						
17						
18						
19						
20	3.98					
21	3.98	3.98	4.39	5.87	0	4.53
22						
23						
24						
25						
26						
27						
28	3.98	3.85	4.26	5.12	0	4.53
29						
30						
31			—		—	

Input in
SW 36 data entry
5/15/01
DSS

SECTION III Measuring Device InformationA. Type & Description of Measuring Device(s): Flow is measured using a ruler at thedam boards at the effluent of Simms Fish Farm Pond #3. 1 measurement taken at each set of dam boards and the combined totals are summed. Flow calculations from 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.

In November, water was diverted to Birch Creek and new dam boards were installed at the diversion point above Pond 3. Also new schooling and dam boards were installed at the effluent of Pond 3 to help insure more accuracy.**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. Summs
SignatureCG Summs Co. Inc.
President
Title1/23/01
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. MannDate 1-30-01Time Fee amount submitted 25.00Correct? yes ☒ no ☐Received by J. MannReceipt No. 0052079Reviewed by Date Data entry by cyhDate 5-21-01Max Div Rate (cfs) 5.87Date 10-21 Total Vol (acre-feet)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESRcvd 1/12/00
IDWR**THIS IS YOUR 1999 WATER MEASUREMENT ANNUAL REPORT**For the Water Measurement Program -
OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICEATTENTION: 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 SWNWSW A0007577
Water Source: SIMMS POND 3
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 BlissState & 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	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE	0	0
2						
3						
4						
5						
6						
7					0	0
8						
9						
10						
11						
12						
13						
14					0	0
15						
16						
17						
18						
19						
20						
21					0	0
22						
23						
24						
25						
26						
27						
28					0	5.41
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	5.41	5.41	5.41	6.02	5.11	4.67
2						
3						
4						
5						
6						
7	5.11	5.41	5.41	6.34	5.11	4.67
8						
9						
10						
11						
12						
13						
14	5.41	4.82	5.72	6.02	4.82	4.67
15						
16						
17						
18						
19						
20						
21	5.41	5.41	5.72	6.02	4.82	4.67
22						
23						
24						
25						
26						
27						
28	5.41	5.41	5.72	5.41	4.82	4.67
29						
30						
31			-----		-----	

SECTION III Measuring Device Information

A. Type & Description of Measuring Device(s): MEASURING Head in inches OVER
DAM BOARDS IN 2 Rectangular suppressed weirs located AT Discharge from
fish rearing Pond (#3) N. Weir is 5'10" S. Weir is 5'9". Flow measured using
Discharge Table supplied by IDWR. Flow measured over both weirs AND then summed

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

Beginning diversion date 6 / 25
 month day

Ending 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 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.

Debra J. Sumino
 Signature

Owner
 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 DUB

Date 1/12/00

Time

Fee amount submitted \$25

Correct? yes ☒ no ☐

Received by Apr Kooch

Receipt No. 0047721

Data entry by

Date

Reviewed by gh

Date 9-8-00

Max Div Rate (cfs) 6.34

Date 10-7-00 Total Vol (acre-feet)

(PM) measured
 dates
 5-1 to 12-31

Diversion Name: SIMMS POND 3

Water Dist Div. No.: 410115

Discharge, Cubic Feet Per Second, Calendar Year 2001

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
02	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
03	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
04	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
05	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
06	4.5	5.0	4.5	4.3	3.7	4.1	3.2	4.1	5.4	4.5	4.5	4.5
07	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
08	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
09	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
10	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
11	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
12	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
13	4.5	4.5	4.5	4.3	3.9	3.9	3.7	4.3	5.3	4.5	4.8	4.5
14	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
15	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
16	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
17	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
18	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
19	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
20	4.8	4.5	4.5	4.3	3.9	3.9	4.0	4.8	5.0	4.5	4.5	4.1
21	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
22	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
23	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
24	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
25	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
26	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
27	4.8	4.5	4.3	4.0	4.1	3.9	3.9	5.0	4.8	4.8	4.8	4.1
28	5.0	4.5	4.3	4.0	4.1	3.2	4.1	5.4	4.5	4.5	4.5	4.5
29	5.0		4.3	4.0	4.1	3.2	4.1	5.4	4.5	4.5	4.5	4.5
30	5.0		4.3	4.0	4.1	3.2	4.1	5.4	4.5	4.5	4.5	4.5
31	5.0		4.3		4.1		4.1	5.4		4.5		4.5
Total	146.3	129.5	137.4	125.1	121.4	115.1	116.4	144.6	151.4	142.5	140.0	134.6
Mean	4.7	4.6	4.4	4.2	3.9	3.8	3.8	4.7	5.0	4.6	4.7	4.3
Min	4.5	4.5	4.3	4.0	3.7	3.2	3.2	4.1	4.5	4.5	4.5	4.1
Max	5.0	5.0	4.5	4.3	4.1	4.1	4.1	5.4	5.4	4.8	4.8	4.5
Ac-Ft	290.1	256.8	272.4	248.1	240.9	228.3	230.9	286.8	300.3	282.6	277.6	266.9

Calendar Year 2001 Total Cfs: 1604

Total Ac-Ft: 3182

Diversion Name: SIMMS POND 3

Water Dist Div. No.: 410115

Discharge, Cubic Feet Per Second, Calendar Year 2000

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
02	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
03	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
04	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
05	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
06	4.7	4.1	4.0	4.1	4.5	4.7	3.6	4.0	4.0	4.5	5.0	0.0
07	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
08	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
09	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
10	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
11	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
12	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
13	4.7	4.1	4.0	4.1	5.0	4.7	3.6	3.7	4.0	4.5	4.7	0.0
14	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
15	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
16	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
17	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
18	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
19	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
20	4.1	4.1	4.4	4.4	5.6	4.3	4.0	4.0	4.3	5.1	0.0	4.4
21	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
22	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
23	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
24	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
25	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
26	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
27	4.1	4.0	4.3	3.7	5.6	4.3	4.0	4.0	4.4	5.9	0.0	4.5
28	4.5	4.0	4.3	4.1	5.0	3.6	4.0	3.9	4.3	5.1	0.0	4.5
29	4.5	4.0	4.3	4.1	5.0	3.6	4.0	3.9	4.3	5.1	0.0	4.5
30	4.5		4.3	4.1	5.0	3.6	4.0	3.9	4.3	5.1	0.0	4.5
31	4.5		4.3		5.0		4.0	3.9		5.1		4.5
Total	136.4	118.0	129.2	122.5	159.8	131.0	118.4	121.1	125.2	156.3	62.5	80.6
Mean	4.4	4.1	4.2	4.1	5.2	4.4	3.8	3.9	4.2	5.0	2.1	2.6
Min	4.1	4.0	4.0	3.7	4.5	3.6	3.6	3.7	4.0	4.5	0.0	0.0
Max	4.7	4.1	4.4	4.4	5.6	4.7	4.0	4.0	4.4	5.9	5.0	4.5
Ac-Ft	270.5	234.1	256.3	243.0	317.0	259.8	234.8	240.2	248.3	310.0	124.0	159.8

Calendar Year 2000 Total Cfs: 1461

Total Ac-Ft: 2898

Diversion Name: SIMMS POND 3

Water Dist Div. No.: 410115

Discharge, Cubic Feet Per Second, Calendar Year 1999

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
01							5.4	5.4	5.4	6.0	5.1	4.7
02							5.4	5.4	5.4	6.0	5.1	4.7
03							5.4	5.4	5.4	6.0	5.1	4.7
04							5.4	5.4	5.4	6.0	5.1	4.7
05							5.4	5.4	5.4	6.0	5.1	4.7
06							5.4	5.4	5.4	6.0	5.1	4.7
07							5.1	5.4	5.4	6.3	5.1	4.7
08							5.1	5.4	5.4	6.3	5.1	4.7
09							5.1	5.4	5.4	6.3	5.1	4.7
10							5.1	5.4	5.4	6.3	5.1	4.7
11							5.1	5.4	5.4	6.3	5.1	4.7
12							5.1	5.4	5.4	6.3	5.1	4.7
13							5.1	5.4	5.4	6.3	5.1	4.7
14							5.4	4.8	5.7	6.0	4.8	4.7
15							5.4	4.8	5.7	6.0	4.8	4.7
16							5.4	4.8	5.7	6.0	4.8	4.7
17							5.4	4.8	5.7	6.0	4.8	4.7
18							5.4	4.8	5.7	6.0	4.8	4.7
19							5.4	4.8	5.7	6.0	4.8	4.7
20							5.4	4.8	5.7	6.0	4.8	4.7
21							5.4	5.4	5.7	6.0	4.8	4.7
22							5.4	5.4	5.7	6.0	4.8	4.7
23							5.4	5.4	5.7	6.0	4.8	4.7
24							5.4	5.4	5.7	6.0	4.8	4.7
25							5.4	5.4	5.7	6.0	4.8	4.7
26							5.4	5.4	5.7	6.0	4.8	4.7
27							5.4	5.4	5.7	6.0	4.8	4.7
28						5.4	5.4	5.4	5.7	5.4	4.8	4.7
29						5.4	5.4	5.4	5.7	5.4	4.8	4.7
30						5.4	5.4	5.4	5.7	5.4	4.8	4.7
31							5.4	5.4		5.4		4.7
Total						16.2	165.6	163.6	167.6	186.4	148.4	144.8
Mean						5.4	5.3	5.3	5.6	6.0	4.9	4.7
Min						5.4	5.1	4.8	5.4	5.4	4.8	4.7
Max						5.4	5.4	5.4	5.7	6.3	5.1	4.7
Ac-Ft						32.2	328.5	324.5	332.4	369.8	294.3	287.2

Calendar Year 1999 Total Cfs: 993

Total Ac-Ft: 1969



STATE OF IDAHO
WATER DISTRICT 130
C/O IDAHO DEPARTMENT OF WATER RESOURCES
1341 FILLMORE ST, STE 200
TWIN FALLS, ID 83301-3380
TELEPHONE NUMBER (208) 736-3033
FACSIMILE NUMBER (208) 736-3037

IDWR DIRECTOR
GARY SPACKMAN

WATERMASTER
CINDY YENTER
Cindy.Yenter@idwr.idaho.gov

June 13, 2013

CLIFF JENSEN
PO BOX 201
HAGERMAN ID 83332

CHRISTY LOU AWALT
PO BOX 392
SAN MIGUEL CA 93451

RE: Measuring Device Approval, Water Right Permit Nos. 37-21456, 37-21486, 37-21827 and 37-21828, Malad State Park Reservoir

By letter dated March 21, 2013, I had directed you to construct or install suitable measurement and control devices pursuant to the above water right permits. The devices were to be installed above the reservoir, and at the diversion from the W-Drain.

On April 16, 2013, I conducted a field inspection and found a controllable screw-type headgate installed at the diversion from the W-Drain, and a four-foot rectangular contracted weir situated near the park office and above the reservoir, which is capable of measuring inflows up to approximately 12 cfs. The weir construction included a staff gage and stilling well as requested. These devices satisfy the measurement requirements of the permits and the minimum requirements of IDWR, and have been inspected and approved by the Watermaster of Water District 130.

Regards,

Cindy Yenter
Watermaster, Water District 130

cc: Bob Jones
Frank Erwin



STATE OF IDAHO
WATER DISTRICT 130
C/O IDAHO DEPARTMENT OF WATER RESOURCES
1341 FILLMORE ST, STE 200
TWIN FALLS, ID 83301-3380
TELEPHONE NUMBER (208) 736-3033
FACSIMILE NUMBER (208) 736-3037

IDWR DIRECTOR
GARY SPACKMAN

WATERMASTER
CINDY YENTER
Cindy.Yenter@idwr.idaho.gov

March 21, 2013

CLIFF JENSEN
PO BOX 201
HAGERMAN ID 83332

RE: Measuring Device Requirement, Permit Nos. 37-21456, 37-21486, 37-21827 and 37-21828,
Malad State Park Reservoir

Cliff-

After a second site visit to Malad Park, and a discussion with Frank Erwin, I have determined that the most appropriate measurement location for this system is in fact above the reservoir. This was my original preference prior to construction of the reservoir. I have also considered measurement of the irrigation system below the reservoir, and while this is entirely possible it would be challenging even using today's technology, due to the high pressures in the delivery pipelines.

The condition of approval which appears on permit nos 37-21456 and 37-21486 is:

"Prior to diversion of water under this right, the right holder shall install and maintain a measuring device and lockable controlling works of a type acceptable to the Department as part of the diverting works."

To meet this condition, the following must be installed:

1. A screw-control headgate at the ditch diversion from the W-Drain.
2. A contracted rectangular sharp-crested weir with crest length of four feet (4 ft) in the diversion ditch to the reservoir, downstream from the point where the ditch splits to the parks. This device must be constructed and placed according to all published Bureau of Reclamation guidelines.
3. A stilling well and staff gage, placed upstream of the weir a distance of at least 3 feet.

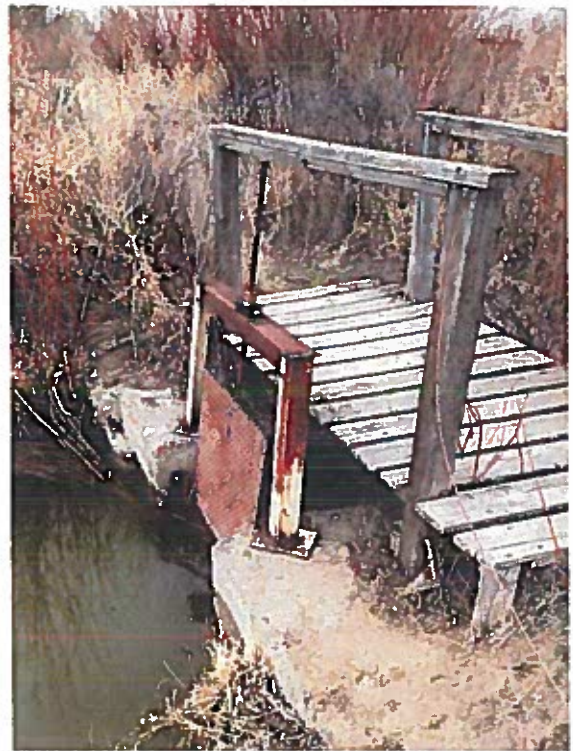
Once these required devices are installed and inspected, IDWR will issue water right licenses based on the above -referenced water right permits.

Mr. Erwin has identified an acceptable location in the ditch above the reservoir inlet where a sharp-crested weir may be installed. This location is near the park office and just off the road. You will be required to take daily readings at the weir during the irrigation season and report those readings to Water District 130 at the end of each year.

Permit Nos. 37-21456, 37-2148, 37-21827 and 37-21828 (Jensen and [redacted] alt)
Verification of installation of control structure and measurement device.
Photos taken by C Yenter, watermaster, 4.16.2013



Screw-type control headgate at head of diversion ditch from W-drain.



4 – foot rectangular contracted weir with staff gage (on bulkhead) and stilling well (for monitor equipment) placed in ditch above reservoir, near park office.



4.16.13

Inland Park Reservoir

photos of new weir -

4' Rect contracted w/stilling well

- although staff gage is on bulkhead!

$h = 0.95$

(checked head against hand-held staff)

$Q = 12.33$ cfs (Cuff indicates last week flows Q for at least 2 days)

photos of new screw gate - gate is nearly all the way open, negligible flows in the drain

Is NSCC measuring this

All flows going to res, none in parks' ditch (except seep)



Rated section on W Drain at Malad State Park main road, just above canyon spill



Check structure and diversion to reservoir, reservoir outlet and control

A WALT

7/15/08

Skull

8.63 OD

.323 thick

4306 ft/sec water @ 59°F

Sound speed 4832

Spacing FLD 12 6.687 in

4806 ft/sec reading

Tag A00 17857

Cindy - Here are
notes from
A-Walt 's if
you want them
for the file.
Michelle

4.22.08 Aqualt Irrigation

(32)

11+12+9 back + $\frac{1}{4}$ mile wheel front
1 big gun + horse pasture

meas. ~ 775 ^{gpm} until valve changed to turn
off horse pasture; dropped to 600 gpm

This system will likely need a flow meter.
2 weeks until up & running normally (Mike)

Hatchery Pond 3 New check - this should work
fine except for the fish screen in the way.
Contacted Josh who will remove the screen
opening about 6 feet - Couldn't get exact
meas. Need to make discharge table.

5.15.08

L = 6.3' on lower check - make table
for Pond 3

AWALT hatching 4.17.08
 Josh Bray 731.0012
 Richard Nelson

Angie 280 0308

Bob 308 6060

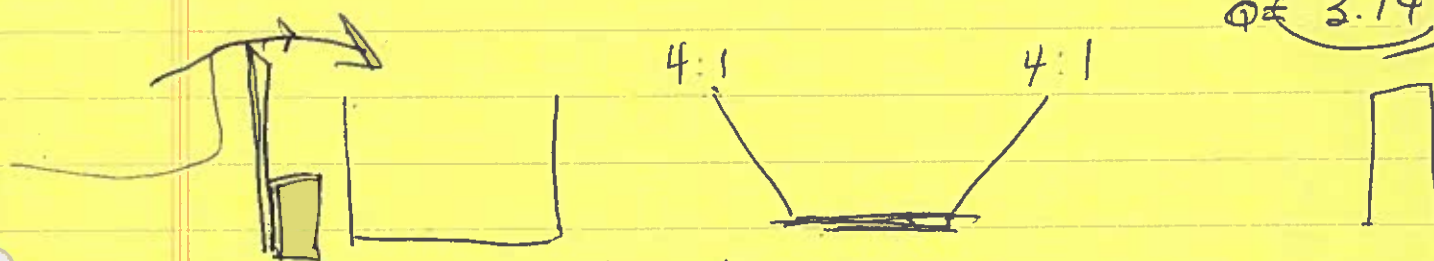
Operators

Pond 3

* Need tabs
 #1 & #4

Weir 1	7.9'	(North)	H = .12	1.09
Weir 2	5.82'		H = .09	0.52
Weir 3	5.75'		H = .11	0.70
* Weir 4	6.0	(South)	H = .12	0.83

Q = 3.14



~~Pond 3 lower weir L = 1.8' H = 0.2'~~

~~rect contracted @ end of settling pond~~

~~$3.33(L - 0.2H)H^{3/2}$~~

~~1.76~~

Build check boards here - new meas site

* Pond 1 end check H = .49' Still OK

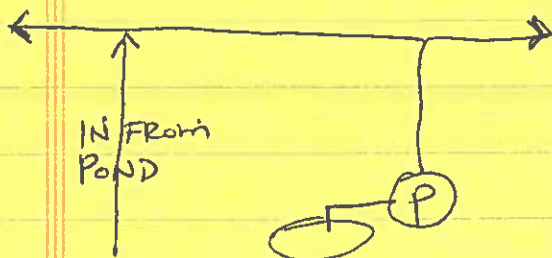
Q = 3.79

Irrigation pump

50 HP centrifugal

06S13E34-20 pole #

03-782135 ABB meter



need meas when irr starts
 look @ new storage permits

Discharge table for Simms Pond #1

Formula: $Q = 3.33 L H^{1.5}$ for rectangular suppressed weirs.

For crest length = 3 feet 4 inches:

Head (feet)	Head (inches)	Flow (cfs)
0.40	4 13/16	2.80
0.41	4 15/16	2.90
0.42	5 1/16	3.01
0.43	5 3/16	3.12
0.44	5 1/4	3.23
0.45	5 3/8	3.34
0.46	5 1/2	3.45
0.47	5 5/8	3.56
0.48	5 3/4	3.68
0.49	5 7/8	3.79
0.50	6	3.91
0.51	6 1/8	4.03
0.52	6 1/4	4.15
0.53	6 3/8	4.27
0.54	6 1/2	4.39
0.55	6 5/8	4.51
0.56	6 3/4	4.63
0.57	6 13/16	4.76
0.58	6 15/16	4.88
0.59	7 1/16	5.01
0.60	7 3/16	5.14

Head (feet)	Head (inches)	Flow (cfs)
0.61	7 5/16	5.27
0.62	7 7/16	5.40
0.63	7 9/16	5.53
0.64	7 11/16	5.66
0.65	7 13/16	5.79
0.66	7 15/16	5.93
0.67	8 1/16	6.06
0.68	8 3/16	6.20
0.69	8 1/4	6.34
0.70	8 3/8	6.47
0.71	8 1/2	6.61
0.72	8 5/8	6.75
0.73	8 3/4	6.90
0.74	8 7/8	7.04
0.75	9	7.18
0.76	9 1/8	7.32
0.77	9 1/4	7.47
0.78	9 3/8	7.62
0.79	9 1/2	7.76
0.80	9 5/8	7.91

prepared by: chodges 5/27/99

Discharge table for Simms Pond #3

Formula: $Q = 3.33 L H^{1.5}$ for rectangular suppressed weirs.

For crest length = 5 feet 10 inches:

(NORTH weir)

Head (feet)	Head (inches)	Flow* (cfs)
0.10	1 3/16	0.61
0.11	1 5/16	0.71
0.12	1 7/16	0.81
0.13	1 9/16	0.91
0.14	1 11/16	1.02
0.15	1 13/16	1.13
0.16	1 15/16	1.24
0.17	2 1/16	1.36
0.18	2 3/16	1.48
0.19	2 1/4	1.61
0.20	2 3/8	1.74
0.21	2 1/2	1.87
0.22	2 5/8	2.00
0.23	2 3/4	2.14
0.24	2 7/8	2.28
0.25	3	2.43
0.26	3 1/8	2.57
0.27	3 1/4	2.72
0.28	3 3/8	2.88
0.29	3 1/2	3.03
0.30	3 5/8	3.19
0.31	3 3/4	3.35
0.32	3 13/16	3.51
0.33	3 15/16	3.68
0.34	4 1/16	3.85
0.35	4 3/16	4.02

Head (feet)	Head (inches)	Flow* (cfs)
0.36	4 5/16	4.19
0.37	4 7/16	4.37
0.38	4 9/16	4.55
0.39	4 11/16	4.73
0.40	4 13/16	4.91
0.41	4 15/16	5.10
0.42	5 1/16	5.28
0.43	5 3/16	5.47
0.44	5 1/4	5.67
0.45	5 3/8	5.86
0.46	5 1/2	6.06
0.47	5 5/8	6.26
0.48	5 3/4	6.46
0.49	5 7/8	6.66
0.50	6	6.86
0.51	6 1/8	7.07
0.52	6 1/4	7.28
0.53	6 3/8	7.49
0.54	6 1/2	7.70
0.55	6 5/8	7.92
0.56	6 3/4	8.14
0.57	6 13/16	8.35
0.58	6 15/16	8.58
0.59	7 1/16	8.80
0.60	7 3/16	9.02

* Note: A reading should be taken over each set of boards and flows summed.

prepared by: chodges 5/27/99

Discharge table for Simms Pond #3

Formula: $Q = 3.33 L H^{1.5}$ for rectangular suppressed weirs.

#3

For crest length = 5 feet 9 inches:

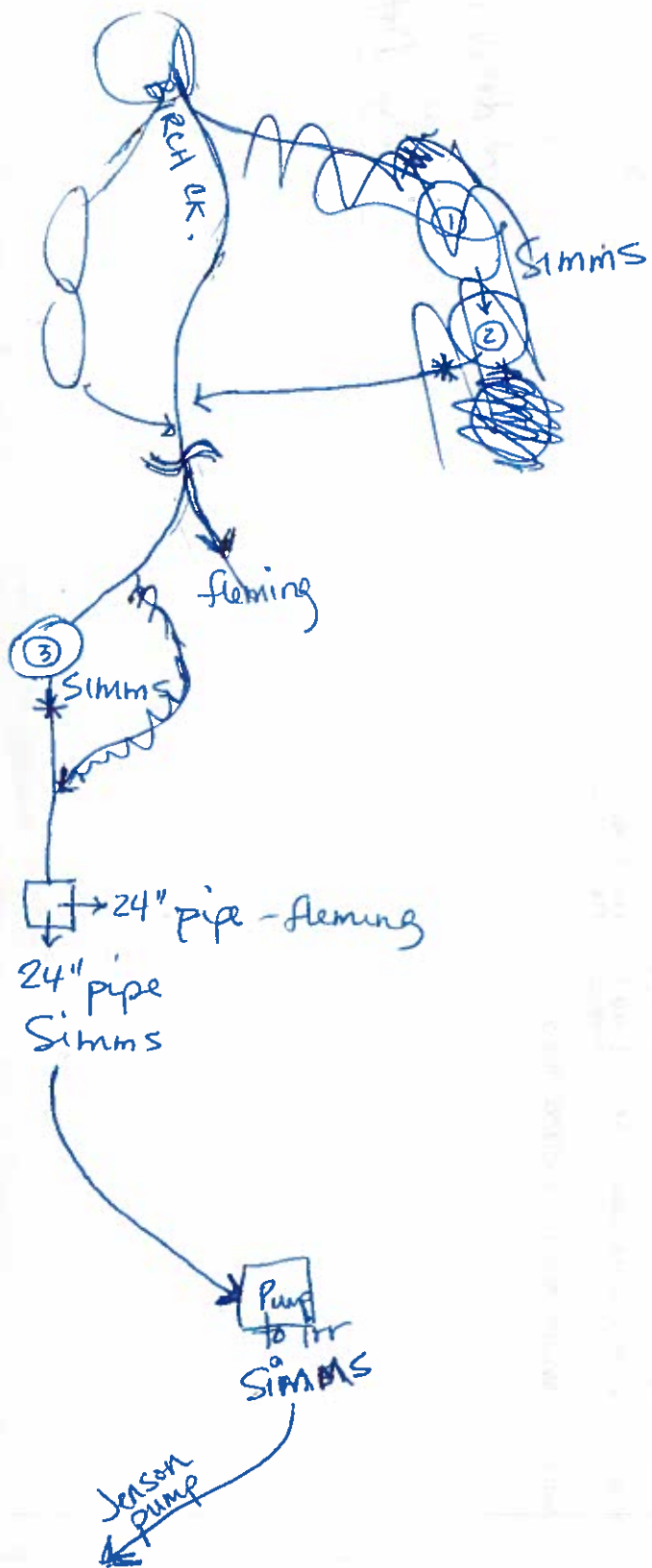
(SOUTH weir)

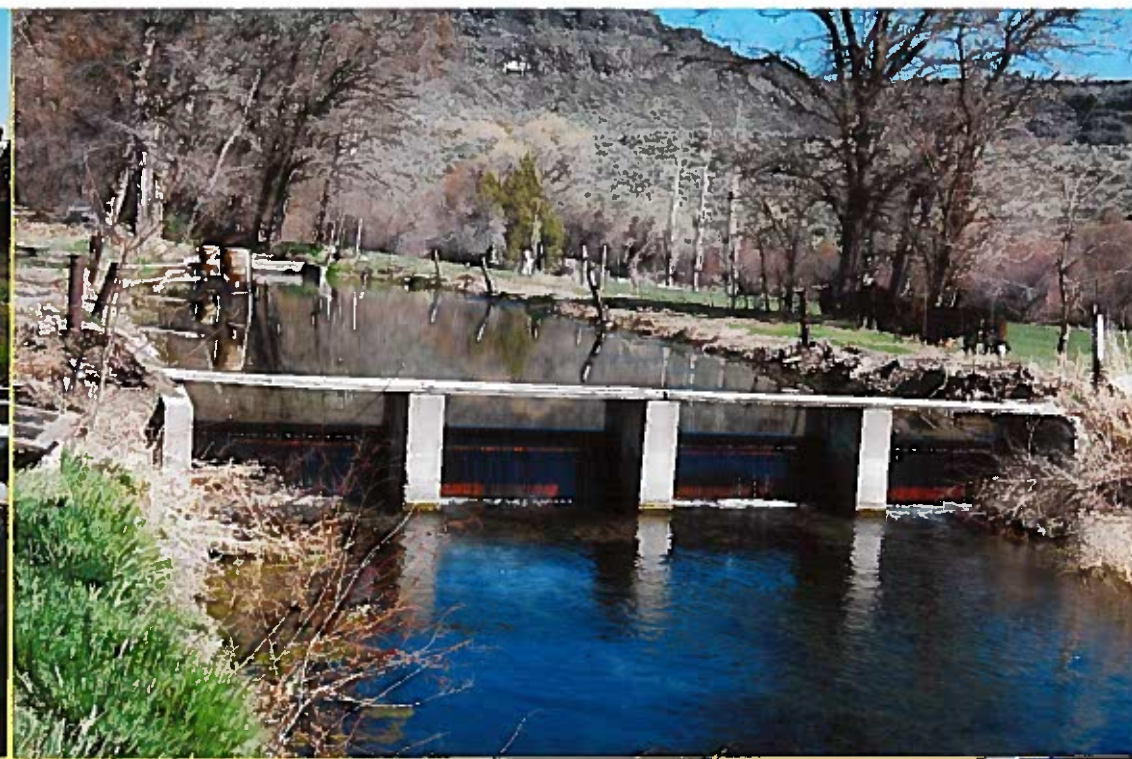
Head (feet)	Head (inches)	Flow* (cfs)
0.10	1 3/16	0.61
0.11	1 5/16	0.70
0.12	1 7/16	0.80
0.13	1 9/16	0.90
0.14	1 11/16	1.00
0.15	1 13/16	1.11
0.16	1 15/16	1.23
0.17	2 1/16	1.34
0.18	2 3/16	1.46
0.19	2 1/4	1.59
0.20	2 3/8	1.71
0.21	2 1/2	1.84
0.22	2 5/8	1.98
0.23	2 3/4	2.11
0.24	2 7/8	2.25
0.25	3	2.39
0.26	3 1/8	2.54
0.27	3 1/4	2.69
0.28	3 3/8	2.84
0.29	3 1/2	2.99
0.30	3 5/8	3.15
0.31	3 3/4	3.30
0.32	3 13/16	3.47
0.33	3 15/16	3.63
0.34	4 1/16	3.80
0.35	4 3/16	3.96

Head (feet)	Head (inches)	Flow* (cfs)
0.36	4 5/16	4.14
0.37	4 7/16	4.31
0.38	4 9/16	4.49
0.39	4 11/16	4.66
0.40	4 13/16	4.84
0.41	4 15/16	5.03
0.42	5 1/16	5.21
0.43	5 3/16	5.40
0.44	5 1/4	5.59
0.45	5 3/8	5.78
0.46	5 1/2	5.97
0.47	5 5/8	6.17
0.48	5 3/4	6.37
0.49	5 7/8	6.57
0.50	6	6.77
0.51	6 1/8	6.97
0.52	6 1/4	7.18
0.53	6 3/8	7.39
0.54	6 1/2	7.60
0.55	6 5/8	7.81
0.56	6 3/4	8.02
0.57	6 13/16	8.24
0.58	6 15/16	8.46
0.59	7 1/16	8.68
0.60	7 3/16	8.90

* Note: A reading should be taken over each set of boards and flows summed.

prepared by: chodges 5/27/99









Opening about 6 feet - Corodut get exact
meas. Need to make discharge table.

5.15.08

$L = 6.3'$ on lower check - make table
for Pond 3