STATE OF IDAHO WATER DISTRICT 130 WATER MEASUREMENT ANNUAL REPORT

JAN 19 2016 SOUTHERN REC

REPORTING YEAR 2015

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

ATTENTION:	Year end data	must be subm	itted to Wate	r District	130, 650	Addison Av	e. West Suit
500, Twin Falls II	D, 83301, on oi	before <u>Janua</u>	ry 15, 2016.	Note Ent			
			F. 199	color :	3/14/17		

Reporter ID/Name:	BOB JONES			115	_		
Water Source:	AWALT HAGE	RMAN RANCH -	ROBT				
Legal Description:	JONES REALT 06S 13E S35 S			_1/4	1/4		
Site Tag No:	BIRCH CK PO						
Diversion Name:	A0007577	410115	9				
	<u> </u>					J	
				<u>.</u>			
	r Right Holder/Ope						
(If there are multiple person below)	water right holders on	a common dite	th or conve	yance system, ple	ase design	ate the contact	
person below) Current Water Right	Owner	Please check f	or address	correction			
	nuly Revocable	The same of the sa		Phone 805	- 238-	1315	
Last, First				or Bob J			
Address Po Box	392			47	08-73	/ ~ :	
City San Mia	امرا						
	9			Mobile			
State & Zip	93451-0393	<u> </u>		e-mail			
Operator or Contact	Person (if different fro	m owner)					
Name Lemmon	Gary			Phone 208	-837	-4808	
Last, First	-//						
Address 2775	5. 1050 E			Fax 208-			
City Hagern	ke u			Mobile 208	-280-	4808	
City 11-921 11	y,c/C			Mobile & Co		11 ~	
State & Zip 10	83332			e-mailgle M	mon a	northrim	i, nei
	er Use Information		N7 T	·			
<u>Crop</u>	<u>Acres</u>		Non-Ir	rigation Use(s)			
		_	FIS	1.			
	<u> </u>		172				
T-4-1							
Total acres	3	_					
Number of idled ac	res						

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						

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2	3.91					2.43
3			п	3.76		
4			3.68			
5						
6					2.43	
7	3.45	303				
8						
9				3.76		
10						
11			3.68			
12					2.43	2.43
13		3.03				
14	X					
15	3.45					
16						
17						
18			4.02	3.03	37 Nr. 1789 and 1	
19			gridre		جوالية مــــــــــــــــــــــــــــــــــــ	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 measur device during the reporting year. Mid June 2015:	ring
Changed check boards along detch 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 recogn that willful submittal of false or inaccurate data is a violation of law subject to the penalty provisions Sections 42-311, 42-350 and 42-351, Idaho Code.	
Signature Secretary 1-11-16 Signature Title Date For Blind Caryon Aquaranch luc.	_
Reviewed by N. Fracks of Date 2/23/6 Date 3/17/16	



JAN 20 2015

STATE OF IDAHO WATER DISTRICT 130 WATER MEASUREMENT ANNUAL REPORT

DEPT OF WATER RESOURCE SOUTHERN REGION



REPORTING YEAR 2014

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 <u>January 20, 2015.</u>

Reporter ID/Name: Water Source: Legal Description: Site Tag No: Diversion Name:	BOB JONES AWALT HAGERMAN RANCH - I JONES REALTY O6S 13E S35 SWNWSW BIRCH CK POND 3 A0007577 410115	ROBT 9	1/41/4	
(If there are multiple v person below) Current Water Right (Name AWALT, Last, First, Address P. D. B	CHRISTY, L.		correction	gnate the contact
Operator or Contact I	Person (if different from owner) 4	2		
Name WOOLEY Last, First, Address 4452 Null	MAX, J. TH 2000 EAST		Phone (208) 326	<u>-7213</u>
City FILER			Mobil (208) 243	-0733
State & Zip ID,	83328		e-mail MJ WOOLLE	1@CABLEONE. NET
SECTION II Water Crop Total acres	er Use Information Acres		rrigation Use(s)	
Number of idled acre	es			

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	2.98 est					
2					2.66	
3	3.15					
4				2.04		
5						
6						7.82
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			4			
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		7				
30		****				
31	2.66					

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		<u></u>	2.04
27						
28					2.82	· · · · · · · · · · · · · · · · · · ·
29		3.85				
30		0.00				.
31				3.49	*********	

For Department Use Only

Reviewed by N Data entry by

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JAN 1 0 2013

STATE OF IDAHO WATER DISTRICT 130 WATER MEASUREMENT ANNUAL REPORT

DEPT. OF WATER RESOURCES SOUTHERN REGION

REPORTING YEAR 2012



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 BIRCH CK POND 3 Legal Description: T A0007577 410115 Site Tag No: Diversion Name:	g1/41/4
SECTION I Water Right Holder/Operator Inform (If there are multiple water right holders on a common dite person below) Current Water Right Owner Name AWACT, CHRESTY, L Last, First, MI Address P. D. BOX 392	
City SAN MEGUEL State & Zip CA. 93451	Mobile
Name Woolled Max J. Last, First, MI Address 4452 North 200 EAST City FILER State & Zip TD. 83328	Phone (208) 326-7213 Fax Mobile (208) 243-0733 e-mail MJWOOLLEY @ CABURONE. NET
SECTION II Water Use Information Crop Acres Total acres	Non-Irrigation Use(s) AQUACULTURA
Number of idled acres	

2.82

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1						
2						
3		2.82	2.82			
4					4.21	
5						
6	2.82			2,98		
7						4.50
8						
9			7.82			
10		2.82				
11					4.21	
12						
13	2.82			2.82		
14						
15			<u> </u>			4,21
16			2.87			
17		2.82				ļ
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						3.4
30			2.78			
31					4.78	

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2					3.85	
3		5.37				
4						
5				5.37		
6	3.85			H igs a		
7			4.59			2.1de
8						
9					3,49	
10		4.78	4.40			
11						
12				4.59		
13	4.21					
14	2				S.I	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			1, 4			
30					3.06	
31		5.37				

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

For Department Use Only

Reviewed by

Data entry by

Date

Date

1 Data anto

STATE OF IDAHO WATER DISTRICT 130 WATER MEASUREMENT ANNUAL REPORT

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 <u>January 15, 2012</u>.

Reporter ID/Name:	g
SECTION I Water Right Holder/Operator Inform (If there are multiple water right holders on a common dita person below)	ch or conveyance system, please designate the contact
	for address correction
Name AWALT, CHRESTY, L. Last, First, MI	Phone (208) 733-0404
Address P.O. BOX 39 2	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 No1277 ZOOO EAST	Fax
City Felch	Mobile (208) 243-0733
State & Zip <u>IO</u> . 83328	e-mail MJ WOULKEY Q. CABLE ONE. NET
SECTION II Water Use Information	
<u>Crop</u> <u>Acres</u>	Non-Irrigation Use(s)
Total acres	AQVACULTURE
Number of idled acres	

V AK

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1				2.82		
2						
3	202000000					
4		Z.98	3.15			5,37
5						
6					2.82	
7	3.06					
8				2.82		
9						
10						4,21
11		Z.98	3.32			
12						
13					3.85	
14	3.15					
15				2.82		
16						
17						6.04
18		Z.98	3.15			
19				-		
20				į,	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						

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	3.85					
2			4.03			3.15
3				E) n		
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	11		0 =	4.21	_	
15	4.40				İ	
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					7	
25					3.49	
26		4,40				
27						
28				4.59		2.82
29	4.21					
30			6.63			
31			4-1-1-1-1			

STATE OF IDAHO
WATER DISTRICT 130
WATER MEASUREMENT ANNUAL REPORT

DEPT. OF WATER RESOURCES

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 <u>January 15, 2011</u>.

Reporter ID/Name: Water Source: AWALT HAGERMAN RANCH Legal Description: Site Tag No: Diversion Name: MAX WOOLLEY AWALT HAGERMAN RANCH D6S 13E 535 SES BIRCH CK PONDS 3 A9007576 410114	9
A0007577 410115	
SECTION I Water Right Holder/Operator Information (If there are multiple water right holders on a common ditch or comperson below) Current Water Right Owner Name AWALT, CHRIST, L. Last, Pirst, MI	
Address P.O. BOX 392	Fax
City SAN MIGUEL	Mobile
State & Zip (A. 9345)	e-mail
Operator or Contact Person (if different from owner) Name WOLLEY MAX, J. Last, First, MI Address 4452 NOCTH 2000 EAST City FILER.	Phon (208) 376-7213 Fax Mobile (208) 243-0733
-A 62220	
State & Zip <u>TD</u> , 83,328	e-mail MIWOOLLEY WCASCEONE. NET
The state of the s	Irrigation Use(s) UA (ULTURE

Number of idled acres

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						

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		1	5.05			3.15
11						
12					3.49	
13		4.18				
14						
15				3.56	Ì	
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	14.
27		5.67			,	
28				3.32		
29			5.34			
30	3.56					2.90
31						

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Reviewed by

Data entry by

Signature

Date___

3/18/11





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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 <u>January 15, 2010.</u>

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 A0007577 410115	80
	A0007577 410115	9
Diversion Name:		
SECTION I Water Right I (If there are multiple water right person below) Current Water Right Owner	nt holders on a common ditch of	on r conveyance system, please designate the contact ddress correction
Name Hwalt Christ	u L	Phone 208-733-0404
Last, First, MI	J	11101103355
Address Y.O. BOX 39	2	Fax
city_ San Migue		MIII
. //	4 .	Mobile
State & Zip CA · 93	451	e-mail
Operator or Contact Person (if	different from owner)	
Name Jones, Angle Last, First, MI		Phone 208-934-583
Address 1828 E. 1700) 5	Fax
City Gooding		Mobile 208-280-0308 e-mail Jonesagg, Com
State & Zip_ID_\$333	D	e-mail Jonesaeg, Com
SECTION II Water Use In		
Crop	Acres	Non-Irrigation Use(s)
~101	<u>_w</u>	
	-0/0	10/01
Total acres	1/2	/ ~
Number of idled acres		

1.84

Merpolote

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	A 1.84					
3				1.84		
4						
5						1.98
6		1.84	1.84			1110
7						
8				-	1.84	
9	the BIN					
10				1.84		
11						
12						2.11
13		1.84	1.84			0111
14						
15					1.84	
16	1.84				1.5-	
17				1.84		
18						
19						1.84
20		1.84	1.84			1.0-1
21			V . D			
22					1.98	
23	1.84		_		1110	
24						
25			·			
26						2.11
27		1.84	1.84	171		3111
28		*		1 11		
29				1	2.11	
30	1.84				MIII	
31				*******	-	

2 . .



DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	,					
2	1.98			3.30		
3			11			
4			3.30	1800g)		3.15
5						- 1
6					3.63	· •
7		3.15		-		
8					_	- 10,10
9				3,30		
10	1.98					
. 11			3,30	OF COO	HCT .	2.99
12						1
13				1	3.80	
14	4	3,30				
15						= 17
16				3,30		
17	2.11		-			
18			3,30	0.30		2.99
19			417=		Al Equi V	(/)
20					3.47	
21		3,30			<u> </u>	
22						
23				3.30		
24	2.99					2.84
25			3,30	BLB CO		
26						
27		-			3.30	
28		3,30			_	
29		-				
30				3,30		
31	2.99		******			

A. Type & Description of Me		
SECTION V Modifications n	elow any major modification made	ort (omit if previously supplied). to the diversion works or measuring
none		
SECTION VI Certification I hereby certify that the informathat willful submittal of false of Sections 42-311, 42-350 and 42 Signature	r inaccurate data is a violation of law	of my knowledge and that I recognize w subject to the penalty provisions of Date
Reviewed by	For Department Use Only Date Date	

DE

STATE OF IDAHO WATER DISTRICT 130 WATER MEASUREMENT ANNUAL REPORT



REPORTING YEAR 2008

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 <u>January 31, 2009</u>.

Reporter ID/Name: Water Source: Legal Description: Site Tag No: Diversion Name:	ANGIE JONES — 06S 13E 34 NWSE — BIRCH CK POND 3 T_ A0007577 41011	5 9		
(If there are multiple person below) Current Water Right	and .	Information mon ditch or convey check for address of	correction	
Name AuxI+ (Last, First Address P.O. Bo City Sen M State & Zip CA	, мі у 392	- - -	Phone <u>208-733-6</u> Fax Mobile e-mail	
Name <u>ones A</u> Last, First, Address 1828 E City Gooding	, Мі 1700S	- - %	Phone <u>208-934-58</u> Fax Mobile <u>208-280-0</u> e-mail <u>Jonesa@g</u> ,	308
Total acres	er Use Information Acres	Non-Irr	rigation Use(s)	

Non-totalizing page 2 of 4 1 Int. all, use estimate. flag thru Moret 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	2	4				3.96
7	, X	7				
8		le la				
9	- 1				2.43	
10	nà nà	3		,		
11	3	Z.		1.84		
12		0				
13	0	4				3.15
14						0110
15	3	3				
16	he	7			2.43	
17					4,10	
18	3	The state of the s	<u> </u>	3.33		
19	7		1.84			
20	77	7	4101			484
21		3				1.01
22	7					
23		_			3.94	
24	6	is			1 7	
25	4	1		243		-
26	na	2		<u> </u>		
27	F	175				5.4
28	173	711	1.84			
29	*		1 0 1			
30					4.84	
31				********	1.01	

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1						
2		299				
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	1 %		51111			
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					254	
29						
30						
31		1.36		4.02	******	

SECTION IV Measuring D A. Type & Description of M	Pevice Information Jeasuring Device(s): Weir	
B. Attach copies of all meas	suring device rating tables to this re	port (omit if previously supplied).
SECTION V Modifications Please describe in the space device during the reporting ye	below any major modification made	e to the diversion works or measuring
SECTION VI Certification I hereby certify that the inforthat willful submittal of false Sections 42-311, 42-350 and 4	or inaccurate data is a violation of la	of my knowledge and that I recognize aw subject to the penalty provisions of
anglo John Signature	Reporter Title	1/31/09 Date
Reviewed by	For Department Use Only Date	

NTD1:12/00

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

Department of Water Resources REPORTING YEAR Southern Region

OPEN CHANNEL MEASUREMENT OR NON-TOTALIZING DEVICE

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.

Water Source: 41725	410115	
Water Right No: BARBARA SI	MMS	187
06S 13E 35 S ¹ Legal Description: T A0007577	<u></u>	
Site Tag No:	3 9	
Diversion Name:		
ECTION I W. A. Di-LA II-LI	T. C	
ECTION I Water Right Holder/Opera If there are multiple water right holders on a		please designate the conta
erson below)		
	ease check for address correction	
lame Simms BANGANA J Last, First, MI	Phone	
ddress 17816 US 30	Fax	<u> </u>
ity Bliss	Mobile	
tate & Zip TO 83314	e-mail	
perator or Contact Person (if different from	nwner)	
ame	Phone	
Last, First, MI	Fax	
ity	Mobile	
tate & Zip	e-mail_	
riginal Owner (if sold within last year)		
ame	Phone	
Last, First, MI	FRORE	
44		
ddress		

NTD1:12/00 Page 2

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						
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7	3.85	4,11		0	\bigcirc	\mathcal{O}
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21	4.11	0	a	0	0	4.390
22						
23						
24						
25						
26						
27					_	
28	4.11	0	0	0		4.39
29						
30						
31						

NTD1:12/00 Page 3

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	1.5		-			
3			-	L I		Lineary F
4		IM Y III	m #1		9/11 HUTT	Till (1000) (261
5						
6	and design	- 77		1		
7	4.54	4.54	4.68	5.57	4,97	4.67
8						21 ZVIII
9		in the same	<u> </u>	1 _= _		= 62(6)
10						- La Mille
11						
12						
13						
_14	4.54	4.54	4.68	5.57	4.97	4.6
15					=(0)=(1 <u> </u> 1)=X	V 741111 (120
16			M			
17		-		- b	- Million See	uktu muz-s
18						
19	1 34.6			4V		-184.8%
20						
21	4,29	5,13	4.68	5.57	4.97	()
22	Will a in		1 1 3 14	THE RESERVE OF THE PERSON NAMED IN COLUMN 1	See MINI Pun	
23						
24			211111	10 . E	11 8	
25	1001	- 2	= "			
26		= = =		-	124	
27		1-6-10-4	= 11.61			_CIT
28	4154	5,13	5.27	4.97	4.67	0
29						-7-W-W
30						
31					We distribute to the second	

NTD1:12/00 Page 4 SECTION III Measuring Device In A. Type & Description of Measuring	formation Device(s):	low measures	AT EGGLUENT SIMMS
POND 3, WATER DEPTH	MRASUIL	en Across (Dam bOARDS, Flow
CALCULATED USING			_
B. Period of Use: For seasonal or part Beginning diversion date / month		sion/use, show turn-on (Ending diversion	
C. Attach copies of all measuring de the Department).	evice rating t	ables to this report (or	nit if previously supplied to
device which would affect the accur drawings, sketches, notes or design in			ng the reporting year. Attach
SECTION V Certification I hereby certify that the information rethat willful submittal of false or inacces Sections 42-311, 42-350 and 42-351,	curate data is		
Signature Jumi	ns acus	ile	1/12/06 Date
IMPORTANT: Each reporting form twenty-five dollars (\$25) per diver (Section 42-701(6), <u>Idaho Code</u>). Fee	sion made pa	yable to the Idaho De	partment of Water Resources.
Received by Fee amount submitted 2500 Receipted by Reviewed by	Date Corr Rec	rect? yesnoeipt No S 0 28 a	<u>8</u> 9
Data entry by		·	
Max Div Rate (cfs)	Date	Total Vol	(acre-feet)

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

RECEIVED

JAN 1 4 2005

NTD1:12/00



Name:

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES WATER MEASUREMENT ANNUAL REPORT

Department of Water Resources Southern Region

REPORTING YEAR 7004

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 <u>January 15</u> of the following year.

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

Water Source: 44725	
41/25	10115
06S 13F 35 SWANAGW	
Legal Description: T_ A0007577	_33
Site Tag No:SIMMS POND 3	9
Diversion Name:	
SECTION I Water Right Holder/Operator Informati	
(If there are multiple water right holders on a common ditch of person below)	r conveyance system, please designate the contact
	address correction
Name SIMMS BARBARA J	Phone 837 4537
Last, First, MI	Filolic 0 2 / 13 v
Address 17816 US 30	Fax
111	*
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)	
Original Owner (y sola willin tast year)	
Name	Phone
Last, First, MI	
Address	
City, State & Zip	

NTD1:12/00 Page 2

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

bic feet per seco			т		
JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
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NA	4,41	4.28	3.86	3,72	4.41
-					
NA	4.28	4.28	3,86	4.12	4.41
NA	4.28	4.28	3.86	4,54	4.41
	VV.		2.0		
	JANUARY	JANUARY FEBRUARY O NA AN AN AN AN AN AN AN AN	NA 4.41 4.28 NA 4.38 4.38	NA 4.28 4.28 3.86 NA 4.28 4.28 3.86	NA 4.28 4.28 3.86 4.12 NA 4.28 4.28 3.86 4.12

NTD1:12/00 Page 3

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						
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11						-
12						
13		8				
14	NA	4.25	4.82	4.39	4.25	4.11
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16			,	a		
17						-
18				v		-
19	3/6/1		-27/			J. char.
20					28	
21	NA	4.68	4.82	3,98	4.11	411
22		Ed Tell		IIII IIII 657 LL		H HIM VIII E
23						6.
24						
25						
26						
27						
28	NA	4.68	4.54	3,98	4.39	4.11
29	1	,		, , ,		
30	-1	1155 Ipi101			W	
31					*******	

NTD1:12/00 Page 4 SECTION III Measuring Device Inf A. Type & Description of Measuring	formation Device(s):F/	OW MEASUNE	O AT Effluent
Simms POND 3. WA	Ten Depth	MRASUREO	ACROSS DAM BOARDS
flow CALCULATED USI			
B. Period of Use: For seasonal or partial Beginning diversion date //	day	/use, show turn-on (Ending diversion o	start) and turn-off (end) dates: date/_ month day
C. Attach copies of all measuring de the Department).	evice rating table	es to this report (or	nit if previously supplied to
SECTION IV Modifications made to Please describe in the space below a device which would affect the accurdrawings, sketches, notes or design into	ny major modificacy of the flow	measurement durir	diversion works or measuring ng the reporting year. Attach
SECTION V Certification I hereby certify that the information rethat willful submittal of false or inaccessections 42-311, 42-350 and 42-351, 1	urate data is a v	t to the best of my liolation of law subj	knowledge and that I recognize ect to the penalty provisions of
Signature Signature	Re		1/13/05 Date
IMPORTANT: Each reporting form twenty-five dollars (\$25) per diver (Section 42-701(6), <u>Idaho Code</u>). Fee	sion made payal	ole to the Idaho De	epartment of Water Resources.
12 A	For Departmen		
Received by	Date	1-14-05	Time
Fee amount submitted 25^{∞}		? yesno	
Receipted by Class		No. 502729	
Reviewed by			
Data entry by			
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 <u>January 15</u> of the following year.

410115

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

41725

Name:

Water Source: Water Right No:	BARBARA SIMMS 06S 13E 35 SWNWSW A0007577	
Legal Description:	SIMMS POND 3	9
Site Tag No:		
Diversion Name:		
SECTION I Water Ri (If there are multiple water person below) Current Water Right Own		ion or conveyance system, please designate the contact address correction
Name SIMMS BAR		Phone \$37 4537
Last, First, 1	MI US 30	Fax
City Bliss 1		Mobile
State & Zip In 8	3314	e-mail
Operator or Contact Pers	on (if different from owner)	
Name Last, First, M	MI	Phone
Address		Fax
City		Mobile
State & Zip		e-mail
Original Owner (if sold w	ithin last year)	
Name		Phone
Last, First, N	II	THE STATE OF THE S
Address		RECEIVED
City, State & Zip		JAN 1 3 2004
		MAY 2.5 2004 Department of Water Resources Southern Region
		Department of Water Resources

NTD1:12/00 Page 2

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	Interna	late)				
3	7					
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6	V					
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14	4.12	4112	0_			
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21	4112	Diverson	0	0	0	
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23						
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25						
26						
27						
28		0		0	\bigcirc	\bigcirc
29						
30						
31						

NTD1:12/00 Page 3

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						
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5						
6						
7	0	3.72	3.85	4.68	5.12	4.39
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10			11/3901			
11			-1. 16			
12	Large Marie					
13						
14	0	3.72	3,85	5.56	5,12	4.34
15						
16						
17	-					
18						
19						
20				7.8320 Ni	S. Salamani I	
21	0	3.72	4.11	5,12	4.67	0
22	17-17					
23					8185,675.8	
24			77.7			
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26		a tree stand			and the same of th	ion, m.
27						
28	3.72	3.85	4.11	5.12	4.39	0
29	0.72	2.00				
30			7 Out			
31	P. HISLE					RECEIVE

NTDI:12/00 Page 4 SECTION III Measuring Device Information A. Type & Description of Measuring Device(s): Flow MOAGUNED AT EXCEPTIONS
POND 3. WATER DEPTH MEASURED ACROSS NAM BOARDS Flow CALCULATER
WISING IDINR DISCHANGE 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
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 C., She 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.
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 C., she 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.
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 This destruction of law subject to the penalty provisions of Sections 42-311, 42-350 and 42-351, Idaho Code. 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
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
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 L. String Title Title To 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 Time Correct? yes no Correct? yes no
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
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

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 <u>January 15</u> of the following year.

410115

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

41725

Name:

Water Source: Water Right No: A	ARBARA SIMMS 3S 13E 35 SWNWSW 0007577 IMMS POND 3	9	
SECTION I Water Right Ho (If there are multiple water right person below) Current Water Right Owner		onveyance system, please	designate the contact
Name SIMMS BACKARA T		Phone 837	4537
Address 17816 US 3	0	Fax	
City Bliss To		Mobile	
State & Zip TO 83314	1 = - 4	e-mail	
Operator or Contact Person (if d	fferent from owner)		
Name		Phone	
Last, First, MI Address		Fax	4 41
City		Mobile	
State & Zip	<u>- 14</u> = -	e-mail	
Original Owner (if sold within las	it year)		
Name		Phone	
Last, First, MI Address			RECEIVED
City, State & Zip			JAN 13 2004

NTD1:12/00 Page 2
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						
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7	3.98	4.12	0			
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NTD1:12/00 Page 3

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	DECEMBE
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9		334	- 11-			
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12						
13	1 73 11 =		III III 7 // II		mmi x iiii	
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	()
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24				A - 1/2 .		
25	Besin	100			,	
26	21021	,				
27						
28	3.72	3.85	4.11	5.12	4.39	0
29	9.72	3,00	1 3 1		1 . 0	
30						
31						RECEIV

NTD1:12/00 Page 4 SECTION III Measuring Device In	formation	4.		
A. Type & Description of Measuring	Device(s):_	Flow MOACE) VLP	O AT EHHERT SIMMS
DOND 3. WATER DEPTH A	Meacured	ACROSS No	m	BOARDS Flow CALCULATION
WSING IDINR DISCHAR	ge TAble			
B. Period of Use: For seasonal or part Beginning diversion date / month				n-on (start) and turn-off (end) dates: sion date / day
C. Attach copies of all measuring dethe Department).	evice rating	tables to this r	epo	rt (omit if previo <mark>usl</mark> y supplied to
SECTION IV Modifications made to Please describe in the space below a device which would affect the accur drawings, sketches, notes or design in	ny major macy of the	odification mad flow measurem		
SECTION V Certification I hereby certify that the information rethat willful submittal of false or inaccessor sections 42-311, 42-350 and 42-351, I	eurate data is daho Code. Stust	dent ditte C., In	law	subject to the penalty provisions of O1/09/04 Date
IMPORTANT: Each reporting form twenty-five dollars (\$25) per divers (Section 42-701(6), Idaho Code). Fee	sion made p	ayable to the l	Idah	o Department of Water Resources.
	For Depar	ment Use Only		
Received by	Da	e		Time
Fee amount submitted 2500 Receipted by (1)	Co	rect? yes	no_	
Receipted by	Rec	ceipt No. 50	24	392
Reviewed by	Dat	e		
Data entry by	Dat	e		
May Div Pata (ofa)	Date	т.	otal	Vol (acre-feet)

NTD1:12/00

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES WATER MEASUREMENT ANNUAL REPORT



REPORTING YEAR 2002

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 <u>January 15</u> 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 SWNWSW	
Site Tag No:	A0007577	
Diversion Name:	SIMMS POND 3	9
CTION I Water Ri	ight Holder/Operator Informati	ion
here are multiple wat		or conveyance system, please designate the
on below) rent Water Right Ow	please check for	address correction
me Bimus QAR		Phone <u>20 837 4537</u>
	MI	Phone AS 757 4027
iress 17816	05 30	Fax
Rliss		Mobile
171157		Mobile
e & Zip ID 8	3314	e-mail_
natan an Cantant Ban	son (if different from owner)	
uior or Contact Pers	on (if different from owner)	
ne		Phone
	MI	Fax
lress		rax
No.		Mobile
te & Zip		e-mail
e & Zip		e-man
ginal Owner (if sold w	vithin last year)	
siiii Omner tij som n	······································	
ne		Phone
	MI	
lress		
State & Zin		

NTD1:12/00 Page 2

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						
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6						
7	4.11	3,98	3,98	3.72	4.11	4.11
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14	3.85	4.25	3,85	3.72	4.11	4.20
15						
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21	3.85	4.25	3.85	3.85	3,85	3,85
22						
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24						
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26						
27	3,98	3,85	3.85	3,85	4.11	3,98
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30						
31						

	d in units of cu		SEPT	OCTOBER	NOVEMBER	DECEMPS
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9			11/34 -//u	PHT .		
10		,		i media ni i		
11						2013
12	P					
13						
14	3.98	3.45	3.85	4.39	4,39	4.97
15						of grown areas
16	(C 10)	r my			H=1117 113 E1	V v ===
17	71.		Li .			
18						- 24
19	21/11/18	. 16	Willey !			- X 5 B -
20	171	March St.	1000			
21	3.72	3.58	4.25	4.39	4.67	WEAT THEFE
22				The Pallago	A THE LEVEL A	
23						
24						
25	_ = [Ш		
26			4	91	'5Z'	<u> </u>
27	3.72	3,85	4.25	4.11	4.67	5.26
28	3.12	600	Po. 9		0 /	0,40
29					u de la company	
30		SHITHT				
31						

NTD1:12/00 Page 4 SECTION III Measuring Device In A. Type & Description of Measuring	formation Device(s):	bu moasured AT &	Clueut Simms
DOND 3. WATER DEPTH	Measures	ACROSS DAM GO	areas flow
(Alculated Using I DWR	Dischance	etables .	
B. Period of Use: For seasonal or part Beginning diversion date/ month	ial year diversi	on/use, show turn-on (star Ending diversion date	rt) and turn-off (end) dates: month day
C. Attach copies of all measuring do the Department).	evice rating ta	oles to this report (omit	if previously supplied to
Please describe in the space below a device which would affect the accur drawings, sketches, notes or design in	ny major modi acy of the flo	fication made to the div w measurement during t	
	·		
SECTION V Certification I hereby certify that the information rethat willful submittal of false or inacces Sections 42-311, 42-350 and 42-351, I	urate data is a		
Signature J. Sym	Zu	Sunas amily D	61/10/63 ate
IMPORTANT: Each reporting form twenty-five dollars (\$25) per divers (Section 42-701(6), <u>Idaho Code</u>). Fee	sion made pay	npanied by a report proceable to the Idaho Depart	essing fee in the amount of ment of Water Resources.
	For Departme	ent Use Only	
Received by Cy	Date_	1-13-03	Time
Fee amount submitted 25		ct? yesno	
Receipted by Cu		ot No. <u>S025420</u>	
Reviewed by		2-04-63	
Data entry by	_		
Max Div Rate (cfs)	Date	Total Vol (acre	e-teet)

NTD1:12/00

Name:

Water Source:

Water Right No:

41725

BARBARA SIMMS BIRCH CREEK

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES WATER MEASUREMENT ANNUAL REPORT

JAN 15 2092

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 <u>January 15</u> of the ensuing year.

410115

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

Legal Description: 06S 13E 35 SWNWSW	
Site Tag No: A0007577 SIMMS POND 3	9
Diversion Name:	9
SECTION I Water Right Holder/Operator Information	
(If there are multiple water right holders on a common di person below)	itch or conveyance system, please designate the conta
	for address correction
Name_SIMMS BARBARA J	
Last, First, MI	Phone
Address 17816 US 30	Fax
01: =0	
City (31:SS LD)	Mobile
State & Zip 8 33/4	e-mail
	- Interest
Operator or Contact Person (if different from owner)	
Name	Phone
Last, First, MI	1 none
Address	Fax
City	Mobile
State & Zip	e-mail
Original Owner (if sold within last year)	
0	
Name	Phone
Last, First, MI	
Address	
City, State & Zip	

NTD1:12/00 Page 2

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	1	3.72	
2	4,53					
3						
4						
5						
6		,:				
7	4.53	4.53	4.53	4.25	3,85	3,8
8						
9						
10		,				
11						
12						
13				<u> </u>		
14	4.82	4.53	4.53	4.25	3,85	3,80
15				•		
16						
17						
18						
19						
20						
21	4.82	4.53	4.25	4.01	4.11	NA
22	2					
23						*
24			. ,			
25			,			
26						
27						
28	4197	4,53	4,25	4.01	4.11	3,19
29						
30						
31						

NTDI:12/00 Page 3
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	DECEMBE
1	•	=	=		_	(3)
2						
3						
4		4	9 1	=		
5		59		(F) = =1		
6	III III II I				Ш	П
7	3,72	4.25	5,26	4,53	4.82	4.5.
8						
9		- I I	78			
10			=/1 1			EMIE
11					킾	
12						
13			= ==			
14	3,98	4.82	4,97	4.53	4,53	4.11
15					_1l=_20	
16	sii= =d-crv	1.5			=1111 = 111	
17		IIII all I	10			
18						18
19	1.16		Kilon.		-6 1	w floor
20	1				-	7
21	3,85	4.97	4.82	4.82	4.82	411
22		1 4			-, (-1)	w Tell grie
23	HILLER POLICE &	I FINANCE		= (= ' = 1	-1122 11117	R 10-
24	-					
25				10 E		
26	=		2 889	=		
27		= =	-		= 111.	
28	411	5.41	4,53	4.53	4.53	4,53
29						1/0
30		1	-4			
31						

NTD1:12/00 Page 4 SECTION III Measuring Device Information A. Type & Description of Measuring Device Information Processing Device Information Processing Device Information Processing Device Information Processing Proces	rmation evice(s): Flowmeacured in when our am	
GOARDS AT EFFLUENT DONO ?	3. I MUSUREMENTTAKEN AT EACH WIER + TUTALS A	ne
SUMMEN. Flows CAKULATED USI'N	og IDWR Tables	
B. Period of Use: For seasonal or partial Beginning diversion date /	I year diversion/use, show turn-on (start) and turn-off (end) da Ending diversion date/_ day	ates:
C. Attach copies of all measuring devi	ice rating tables to this report (omit if previously supplied	to
	major modification made to the diversion works or measury of the flow measurement during the reporting year. A	
<u>Ø</u>	·	
	• •	
	norted is correct to the best of my knowledge and that I recognate data is a violation of law subject to the penalty provisionaho Code.	
-6 ~		
Signature	Ster. 1/14/02 Date	<u></u>
twenty-five dollars (\$25) per diversio	chall be accompanied by a report processing fee in the amount on made payable to the Idaho Department of Water Resources waived if no diversions are made during the report	ırces.
9-	For Department Use Only	
Received by Max	Date 1-15-02 Time 2:38	
Fee amount submitted 2500	Correct? yesno	
Receipted by Men	Receipt No. 0059189	
Reviewed by	Date	
Data entry by	Date 1/25/80	
Max Div Rate (cfs)	DateTotal Vol (acre-feet)	

NTD1:12/00

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES WATER MEASUREMENT ANNUAL REPORT

JAN 2 9 2001

REPORTING YEAR 2000

Department of Water Resources

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 <u>January 15</u> of the ensuing year.

BARBARA SIMMS

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

41725

BIRCH CREEK

06\$ 13E 35 SWNWSW

Name:

Water Source:

Water Right No:

Legal Description: A0007577	410115
Site Tag No: SIMMS POND 3	9
Diversion Name:	
ECTION I Water Right Holder/Operator Information	tion
If there are multiple water right holders on a common ditch erson below)	
Current Water Right Owner Please check for	address correction
Name SIMMS BARBARA J	Phone
Last, First, MI	
Last, First, MI Address 17816 U.S Hwy 30	Fax
City Bliss	Mobile
tate & Zip <u>ID</u> 83314	e-mail_
_	
perator or Contact Person (if different from owner)	
Jame	Phone
Last, First, MI	
ddress	Fax
lity	Mobile
tate & Zip	e-mail
	- IIIIII
riginal Owner (if sold within last year)	
ame	Phone
Last, First, MI	
ddress	
ity. State & Zin	
ity, State & Zip	

NTD1:12/00 Page 2
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	4.60	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			ğ			
10						
11						
12						,
13						
14	11.7	4.11	4.39	4,39	5.57	4125
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		3	,		,	
28	4.53	3,98	4.25	4.11	4,97	3,59
29						
30						
31						
		1	I			

NTDI:12/00 Page 3
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		ès s		-		
3					15	
4			<u>u</u>	,	. 7 - 7	
5				1100_		
6	1 m ·i 1	II II · II	11 <u> </u>	11 #47 1	MA TELLED	III. III. In LIII
7	3,59	3.72	3,99	4.53	4.67	0
8			==			IIÿ I ⇒
9				- =		11
10			ligei	.II II III 22		
11	(E)					
12				4.4		
13						
14	3,99	3.99	4.26	5112	0.11	4.39
15	,					
16		F III 301				17 1
17	HE .D		SCHI VIII			
18	4					
19				n e	x 2) s	X =
20	3 -12		Tiat			
21	398	3.98	4,39	.5.87	0	4153
22	<u> </u>	- 4	404 =11			N m mer-
23		T WHILE IN	3-			
24						
25		y.				
26			1174			, 1 I
27		W	a len l			
28	3,98	3,85	4.26	5,17	0	4,53
29						
30						
31					h	

NTD1:12/00 Page 4 SECTION III Measuring Device I A. Type & Description of Measuring	Information ng Device(s): Flow	IIs Measured U	Sing Arrulen AT The	
DAM BOARDS INT The Effluent of				
SeT of Dan hoans and The con Discharge Tables B. Period of Use: For seasonal or pa Beginning diversion date	nb/woll ToTak A	120 cummer , Fla	tart) and turn-off (end) date	<u> IDWR</u>
C. Attach copies of all measuring the Department).	device rating table	es to this report (om	it if previously supplied to	D
SECTION IV Modifications made Please describe in the space below device which would affect the accu- drawings, sketches, notes or design in	any major modificuracy of the flow	measurement during		
IN NORMHOR . MATOR WAS PIN	ented to Ria	ch (need AND A)	ew Dan Goards wen	e i NSI
AT The chivensian point Above	Poud 3. A	50 1104) Scn00.	DING AND DAM 6	CANADO
NEVER INSTALLED AT The Off				
SECTION V Certification I hereby certify that the information that willful submittal of false or inac Sections 42-311, 42-350 and 42-351,	ccurate data is a vi	olation of law subjec		
Signature	Title		Daté /	
IMPORTANT: Each reporting for twenty-five dollars (\$25) per dive (Section 42-701(6), Idaho Code). Fyear.	rsion made payab	le to the Idaho Depa	artment of Water Resource	es.
	For Department	Use Only		
Received by	Date	1-30.01	Time	
Fee amount submitted 35 =	Correct?	yes_no		
Receipted by J. March	Receipt	No. <u>CO5207</u>	9	
Reviewed by	Date		-	
Data entry by Csh	Date_5	-21-01		
Max Div Rate (cfs) 5.87	Date 10 - 2	Total Vol (acı	e-feet)	

SW1:1/99

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

RCUB 1/12/00 1DWQ

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

	January 15, 2000		
A separate reporting form must be subr	nitted for each diversi	on. Refer to page	e 5 for instructions.
This report form may be used for the	e following diversion	1:	SIV# 410115
Diversion Name or Facility: Water Source: Water Right(s) Owner or Contact: (owner name(s) may be omitted if there are multiple owners on same diversion)	06S 13E 35 SWI SIMMS POND 3 BIRCH CREEK SIMMS, CLIFFOR BARBARA SIMMS		0007577 SED)
SECTION I Water Right Holder/Op (If there are multiple water right holders of contact person below)	erator Information on a common ditch or co	onveyance system	, please designate th
Current Water Right Owner P	lease check for address	correction	
Name Simus Barbara J Last, First, MI Address 17814 US Huy		Phone 208	837 4537
Address 17814 US Hwy	30	Fax	111
City Bliss		State & Zip	D 83314
Original Owner (if sold within last year)			
NameLast, First, MI		Phone	
Address		Fax	
City		State & Zip	
Operator or Contact Person			
Name Simus BARBARA J Last, First, MI Address 11816 US Hwy	<u> </u>	Phone 208 8	37 4537
Address 17816 US Hwy	30	Fax	
City Bliss		State & Zip	1 1) 83314

SW1:1/99 Page 2

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

6 7 7 1 6

DAY	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
1	NOTAUAILABLE	NOT ANAILAND	NOT AUDITABLE	UNTAUA lable	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					\bigcirc	0
22						
23					-	
24						
25						
26	,					
27					 	
28						5.41
29				-		
30					,	
31					*	

SW1:1/99 Page 3

30

31

DAY	JULY	AUGUST	SEPT	OCTOBER	NOVEMBER	DECEMBER
1	5.41	5.41	5,41	6.02	5.11	4.67
2						
3						
4					-	
5						1111
6						
7	5.11	5.41	5.41	(6.34)	5.11	4.67
8						1 -me
9				(10)	e(C=111 A	/1 W11 1 X350
10		, T	1 2			
11						
12			243			
13						-
14	5.41	4.82	5.72	6.02	4.82	4.67
15						
16						
17	E 11			11	III 3 III V	
18				-644		
19						
20	, ,			- 30 84		
21	5.41	5.41	5.72	6.02	4.82	4.67
22			-11			² / ₂ F ₁₁ – IT
23	Ę		10 _6 -	1 1	11	
24		,				Ti (m) =
25						
26			,			
27			-			
28	5.41	5.41	5.72	5.41	4.82	4.67
29	a"ı					

9-13-00 Dect 5 W36dataentry, md 1

SW1:1/99 Page 4	
SECTION III Measuring Device Information A. Type & Description of Measuring Device(s): Measuring Hero is inches Over	
DAM GOARDS IN 2 REGTAND WAR SUPPRESSED WE'ME LOCATED AT DISCHANGE FROM	<u> </u>
fish peoning DONO (#3) N. Wien 13 5'10" S. Wien is 5'9". Flow Measuren us	ing
Dischange Table supplied by I DWR. Flow Measured own Both wiens AUD Thew.	
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 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 measuring device which would affect the accuracy of the flow measurement during 199 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 the recognize that willful submittal of false or inaccurate data is a violation of law subject to penalty provisions of Sections 42-311, 42-350 and 42-351, <u>Idaho Code</u> .	
Darbary Simms Owner 1/11/2000	
Signature Title Date	
IMPORTANT: Each reporting form shall be accompanied by a report processing fee in amount of twenty-five dollars (\$25) per diversion made payable to the Idaho Department Water Resources. (Section 42-701(6), <u>Idaho Code</u>). Fee may be waived if no diversions made during the reporting year.	t of
For Department Use Only	
Received by Dub Date 1/12/00 Time	-
Fee amount submitted 525 Correct? yes no	
Receipted by Ap 2 Kooch Receipt No. co47721	Kurod
Data entry by Date da	tes
Reviewed by The Date 9-8-00 5-1 to	
Max Div Rate (cfs) 6.34 Date 10-7-00 Total Vol (acre-feet)	

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 Max	4.5 5.0	4.5 5.0	4.3 4.5	4.0 4.3	3.7 4.1	3.2 4.1	3.2 4.1	4.1 5.4	4.5 5.4	4.5 4.8	4.5 4.8	4.1 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	0.811	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 Max						5.4 5.4	5.1 5.4	4.8 5.4	5.4 5.7	5.4 6.3	4.8 5.1	4.7 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.

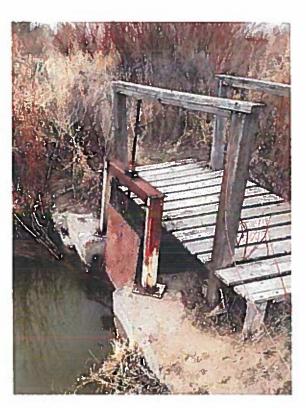
Once these required devices are installed and inspected, IDWR will issue water right licenses based on the above -referenced water right permits.

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 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

Malad Park Reservoir

Photos of new werr
4' Rect contracted wy 8ning well

- although steff goes is on bulk had!

h= 0.95

(chicled had against hand-held Steff)

Q= 12.33 (fs (Cutt indicates last week
flows & For at least 2 days)

Photosof new Screw gate - gate is nearly all the way open, neghyubu flows in the drain Is NSCC measuring this

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





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









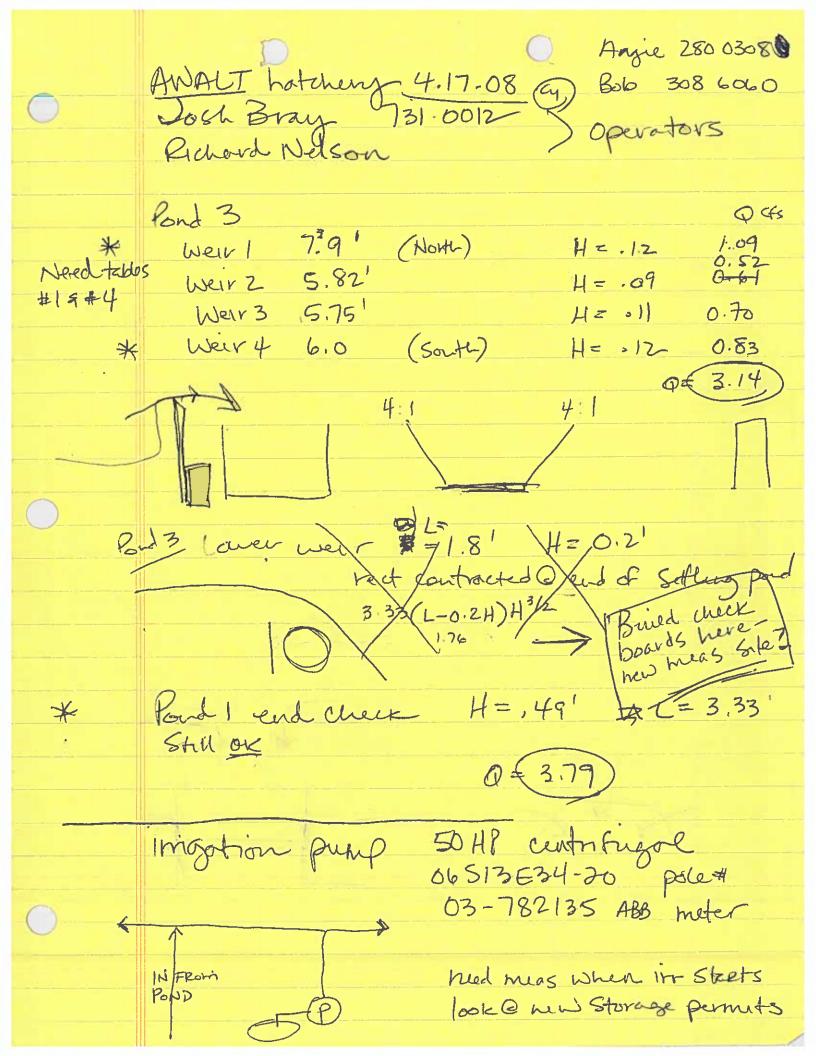
Check structure and diversion to reservoir, reservoir outlet and control

A	WAX >115/08
	Skel 1
	8.63 00
Andrew 100 100 100 100 100 100 100 100 100 10	, 323 thigh
	12-1 CV11 201 2 CA-5
	4306 C4/80 money of 59-F
	Sound Speed 4832
	Spacing FLD12 6.687 in
-	4806 ft/se reading
	100 NOV 1000
	tag ADD 17807
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	aray,
	notes from S if A - Wast from
***************************************	A- Water How Michelle
	ver want
	The GD.
	for the micheles
~	

4.22.08 Awalt Imagition 11+12+9 bock + 14 mile Wheel feart 1 big gun + horse pasture mers. ~ 775 until value manged to turn off horse pasture; dropped to 600 gpm This system will likely need a find meter. Zweeks when up & running normally (Mike) Hotcheny 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 - Conedut get exact mers. Need to make discharge table. 5.15.08 L=6.31 on lower cheek - make table for Pond 3 for Poul 3

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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)		Head (feet)	Head (inches)	Flow (cfs)
0.40	4 13/16	2.80	ľГ	0.61	7 5/16	5.27
0.41	4 15/16	2.90		0.62	7 7/16	5.40
0.42		3.01		0.63	7 9/16	5.53
0.43	5 3/16	3.12		0.64	7 11/16	5.66
0.44	5 1/4	3.23		0.65	7 13/16	5.79
0.45		3.34		0.66	7 15/16	5.93
0.46	5 1/2	3.45		0.67	8 1/16	6,06
0.47	5 5/8	3.56		0.68	8 3/16	6.20
0.48	5 3/4	3.68		0.69	8 1/4	6.34
0.49	5 7/8	3.79		0.70	8 3/8	6.47
0.50	6	3.91		0.71	8 1/2	6.61
0.51	6 1/8	4.03		0.72	8 5/8	6.75
0.52	6 1/4	4.15	11	0.73	8 3/4	6.90
0.53	6 3/8	4.27		0.74	8 7/8	7.04
0.54	6 1/2	4.39		0.75	9	7.18
0.55	6 5/8	4.51		0.76	9 1/8	7.32
0.56	6 3/4	4.63		0.77	9 1/4	7.47
0.57	6 13/16	4.76		0.78	9 3/8	7.62
0.58	6 15/16	4.88		0.79	9 1/2	7.76
0.59	7 1/16	5.01		0.80	9 5/8	7.91
0.60	7 3/16	5.14				

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)		Head (feet)	Head (inches)	Flow* (cfs)
# 0.10	1 3/16	0.61]	0.36	4 5/16	4.19
0.11	1 5/16	0.71		0.37	4 7/16	4.37
0.12	1 7/16	0.81		0.38	4 9/16	4.55
0.13	1 9/16	0.91		0.39	4 11/16	4.73
0.14	1 11/16	1.02		0.40	4 13/16	4.91
0.15	1 13/16	1.13		0.41	4 15/16	5.10
0.16	1 15/16	1.24		0.42	5_1/16 -	5.28
0.17	2 1/16	1.36		0.43	5 3/16	5.47
0.18	2 3/16	1.48	ſ	0.44	5 1/4	5.67
0.19	2 1/4	1.61		0.45	5 3/8	5.86
0.20	2 3/8	1.74	ĺ	0.46	5 1/2	6.06
0.21	2 1/2	1.87		0.47	5 5/8	6.26
0.22	2 5/8	2.00		0.48	5 3/4	6.46
0.23	2 3/4	2.14	ſ	0.49	5 7/8	6.66
0.24	2 7/8	2.28	ſ	0.50	6	6.86
0.25	3	2.43	Ī	0.51	6 1/8	7.07
0.26	3 1/8	2.57	ſ	0.52	6 1/4	7.28
0.27	3 1/4	2.72	ſ	0.53	6 3/8	7.49
0.28	3 3/8	2.88	Γ	0.54	6 1/2	7.70
0.29	3 1/2	3.03	Γ	0.55	6 5/8	7.92
0.30	3 5/8	3.19		0.56	6 3/4	8.14
0.31	3 3/4	3.35	Γ	0.57	6 13/16	8.35
0.32	3 13/16	3.51		0.58	6 15/16	8.58
0.33	3 15/16	3.68		0.59	7 1/16	8.80
0.34	4 1/16	3.85		0.60	7 3/16	9.02
0.35	4 3/16	4.02				

^{*} 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.



For crest length = 5 feet 9 inches:

(SOUTH weir)

Head (feet)	Head (inches)	Flow* (cfs)		Head (feet)	Head (inches)	Flow* (cfs)
0.10	1 3/16	0.61		0.36	4 5/16	4.14
0.11	1 5/16	0.70		0.37	4 7/16	4.31
0.12	1 7/16	0.80		0.38	4 9/16	4.49
0.13	1 9/16	0.90		0.39	4 11/16	4.66
0.14	1 11/16	1.00		0.40	4 13/16	4.84
0.15	1 13/16	1.11		0.41	4 15/16	5.03
0.16	1 15/16	1.23		0.42	5 1/16	5.21
0.17	2 1/16	1.34		0.43	5 3/16	5.40
0.18	2 3/16	1.46		0.44	5 1/4	5.59
0.19	2 1/4	1.59		0.45	5 3/8	5.78
0.20	2 3/8	1.71		0.46	5 1/2	5.97
0.21	2 1/2	1.84	i	0.47	5 5/8	6.17
0.22	2 5/8	1.98		0.48	5 3/4	6.37
0.23	2 3/4	2.11		0.49	5 7/8	6.57
0.24	2 7/8	2.25		0.50	6	6.77
0.25	3	2.39		0.51	6 1/8	6.97
0.26	3 1/8	2.54	ĺ	0.52	6 1/4	7.18
0.27	3 1/4	2.69	ſ	0.53	6 3/8	7.39
0.28	3 3/8	2.84	ſ	0.54	6 1/2	7.60
0.29	3 1/2	2.99		0.55	6 5/8	7.81
0.30	3 5/8	3.15		0.56	6 3/4	8.02
0.31	3 3/4	3.30	[0.57	6 13/16	8.24
0.32	3 13/16	3.47		0.58	6 15/16	8.46
0.33	3 15/16	3.63		0.59	7 1/16	8.68
0.34	4 1/16	3.80		0.60	7 3/16	8.90
0.35	4 3/16	3.96	[

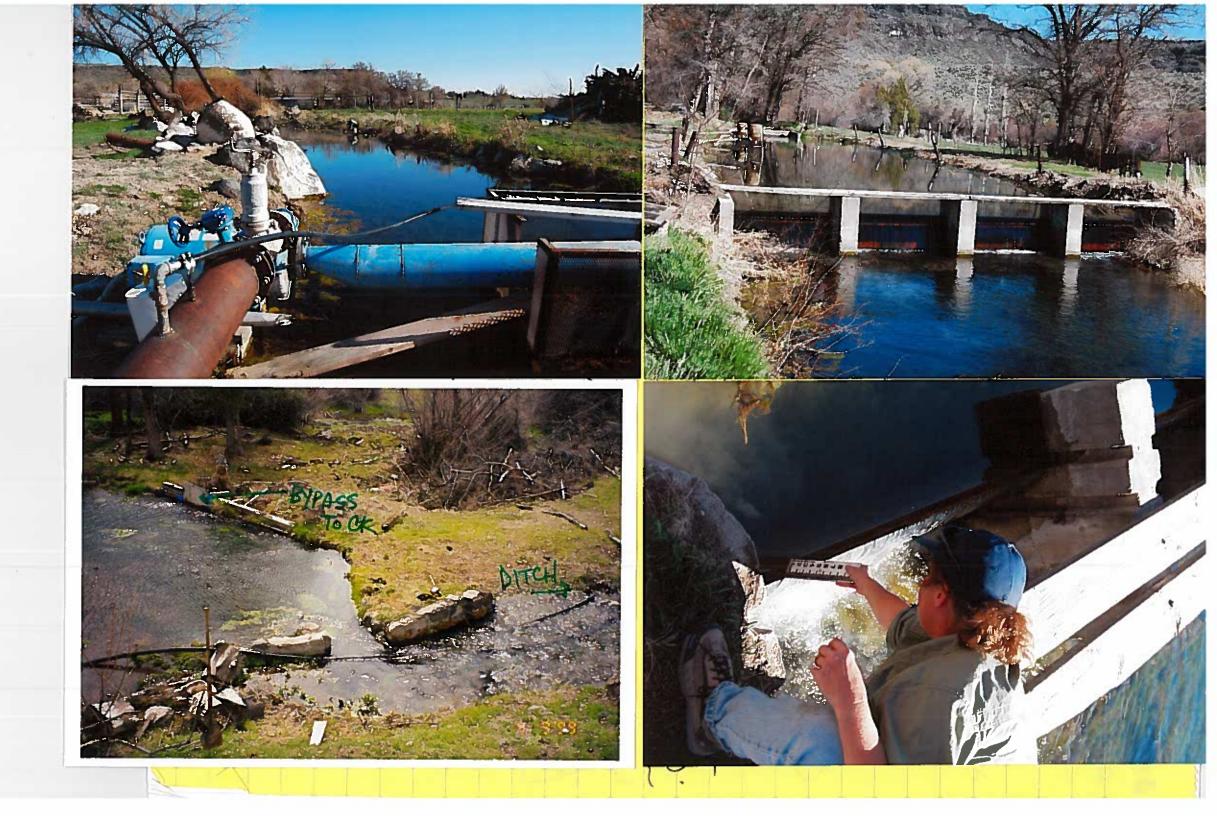
^{*} Note: A reading should be taken over each set of boards and flows summed.

prepared by: chodges 5/27/99

24" pipe - fleming 24" pipe Simms Pung to irr SIMMAS

3_1

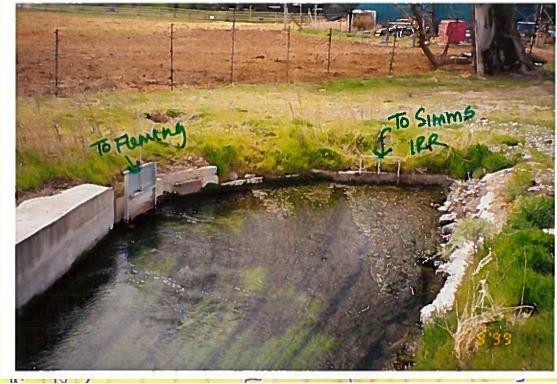












BYPASS TO BROUCK

