

24-10736

Robinson Family Ranch

No Layout Needed

Domestic

09/08/2006

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 24-10736

NAME AND ADDRESS: ROBINSON FAMILY LTD PARTNERSHIP
1856 S 180 W
OREM UT 84058

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.020 CFS

The quantity of water under this right for domestic use shall not exceed
13,000 gallons per day.

PRIORITY DATE: 08/15/1986

POINT OF DIVERSION: T05S R46E S4 NWNWSE Within CARIBOU County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
DOMESTIC	05/20 10/10	0.020 CFS
Domestic use is for 1 home.		

PLACE OF USE: DOMESTIC Within CARIBOU County

T05S R46E S04 NWSE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

The quantity of water decreed for this water right for domestic use is not
a determination of historical beneficial use.

This partial decree is subject to such general provisions necessary for
the definition of the rights or for the efficient administration of the water
rights as may be ultimately determined by the Court at a point in time no
later than the entry of a final unified decree. Section 42-1412(6), Idaho
Code.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Beneficial Use

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 24-10736
Date Received: 6/19/2006
Receipt No:
Received By:

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

ROBINSON FAMILY RANCH Phone: (801)225-6103

C/O R DEAN ROBINSON
1856 S 180 W

OREM UT USA 84058

2. Date of Priority: 08/15/1986

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
05S	46E	4	NW SE	CARIBOU	

5. Description of diverting works:

Well, pump, pressue system, pipelines.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	05/20	10/10	0.02	

7. Total Quantity Appropriated is:
0.02 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
Number of homes: 2

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
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05S

46E 4

NW SE

DOMESTIC

11. Place of use in counties: CARIBOU

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

The quantity of water decreed for this water right for domestic use is not a determination of historical beneficial use.

The quantity of water under this right for domestic use shall not exceed 13,000 gallons per day.

2 Trailers, 1 Wash House, Lawn and Flowers area less than .5 acres

15. Basis of Claim: Beneficial Use

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 24-10736

Date Received 6/19/06

Receipt Number 8000013

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) ROBINSON FAMILY LIMITED PARTNERSHIP Phone (801) 225-6103
% R. DEAN ROBINSON
Mailing Address 1856 S. 180W. OREM, UTAH Zip 84058

2. Date of Priority (Only one per claim) 8-15-1986 Month/Day/Year

3. Source of water supply (Check one) (☒ Groundwater or Other () (a) WELL
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 5 Range 46E

Section 4 NW 1/4 of SE 1/4 of _____ 1/4, Govt. Lot _____, BM.,

County of CARIBOU

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. WELL, PUMP, PRESSURE SYSTEM, PIPELINES

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For DOMESTIC purposes from MAY 20 to OCTOBER 10 amount .02 (cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .02 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 2 TRAILERS, 1 WASH HOUSE, LAWN & FLOWERS,
AREA LESS THAN .5 ACRE

Domestic

10. Place of use is: Township: 5 Range 46 E

Section 4, NW 1/4 of SE 1/4, Govt. Lot _____ B.M.,

County of CARIBOU for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

11. In which county (ies) are lands listed above as place of use located? CARIBOU

12. Do you own the property listed above as place of use? Yes ☒ No _____

If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)
(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not ☒ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments _____

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date _____

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am RANCH MANAGER

of ROBINSON FAMILY LIMITED PARTNERSHIP that I have signed the foregoing

document in the space below as RANCH MANAGER of ROBINSON FAMILY LIMITED PARTNERSHIP

and that the statements contained in the foregoing document are true and correct.

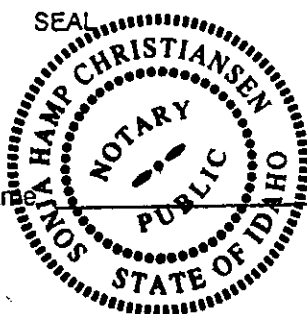
Signature of Authorized Agent [Signature] Date 6-19-06

Title and Organization _____

State of Idaho/or Idaho)

County of Caribou) SS.

Subscribed and sworn (or affirmed) before me this 19 day of June 2006



Notary Public [Signature]

Residing at Caribou

My Commission Expires May 26, 2012

Last Name _____ Ident No. _____