

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: AUG-18-1997
PAGE: A-201

RIGHT NUMBER: 43-10450

NAME & ADDRESS: SYLVIA T GRUSH
PETER J GRUSH
HC72 BOX 2046
MALTA ID 83342

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 05/31/1979

POINT OF DIVERSION: T13S R26E S25 NWSWNE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T13S R26E S25 SWNE

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

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
PARCEL NO. 13S26E251350

Claim proofread by: KT

Date: 9-5

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: AUG-8-1997
PAGE: A-206

RIGHT NUMBER: 43-10450

NAME & ADDRESS: SYLVIA T GRUSH
PETER J GRUSH
HC72 BOX 2046
MALTA ID 83342

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 05/31/1979

POINT OF DIVERSION: T13S R26E S25 NWSWNE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC DOMESTIC, 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T13S R26E S25 SWNE

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

PARCEL NO. 13S26E251350

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim data entry by: 

Date: 8-14-97

Data entry verified by: KT

Date: 8/15

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: A43-10450
Date Received: 6/06/1989
Receipt No: S008099
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: PETER J. GRUSH 208-645-2361
Address: HC 72 BOX 2046
MALTA, ID 83342

AND/OR

Name: SYLVIA T. GRUSH 208-645-2361
Address: HC 72 BOX 2046
MALTA, ID 83342

2. Date of Priority: MAY 31, 1979

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
13S	26E	25	NW	SW	NE		CASSIA

5. Description of diverting works:
200'X8" WELL, 7.5HP PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSEHOLD

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
13S	26E	25	SW NE		DOMEST	

11. Place of use in counties: CASSIA

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

13. Other Water Rights Used:
NONE

14. Remarks:

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.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

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

Notary Public

Seal

Residing at _____

My Commission Expires _____

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. 443-10450
Date Received 6-6-89
Receipt Number 5007747 8099

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) Peter J. and/or Sylvia T. Grush Phone (208) 645-2361Mailing Address Hc 72 Box 2046 Malta, Idaho Zip 833422. Date of Priority (Only one per claim) 5/31/79 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 135 Range 26 ESection 25, NW 1/4 of SW 1/4 of NE 1/4, Govt. Lot _____, BM.,County of Cassia

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 is 200' deep, 8" casing, 7.5 HP pump

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For domestic purposes from 1/1 to 12/31 amount 0.04 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.04 (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) 1 Household

MICROFILMED

MAR 05 1993

RECEIVED

JUN 6 1989

Department of Water Resources
Southern Region Office

10. Place of use is: Township: 135 Range 26 E
Section 25, SW 1/4 of NE 1/4, Govt. Lot _____, B.M.,
County of Cassia for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any NONE
11. In which county (ies) are lands listed above as place of use located? Cassia
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. None ☒
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) Sylvia T. Grush
Number of Attachments 0

By signing I/We acknowledge reading the notice on the back of this claim form. I/We wish to receive for a small annual fee monthly copies of the docket sheet. YES _____ NO ☒

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.
Signature of Claimant (s) Sylvia T. Grush Date 6/5/89
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____
Title and Organization _____

State of Idaho/or Idaho)
County of Cassia) SS.

Subscribed and sworn (or affirmed) before me this 5 day of June 19 89

SEAL

Notary Public Janet Volney
Residing at Malta Idaho
My Commission Expires 3/17/92

Last Name Grush Ident No. _____

Copies: White-State, Yellow-Claimant
MICROFILMED
MAR 05 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Nov. 21, 1989

Re: A43-10445
A43-10449
A43-10450

PETER J GRUSH
HC 72 BOX 2046
MALTA ID 83342

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 05 1993

6/9/94

COMMUNICATION DOCUMENTATION

Claim No. A43-10445

This form is to be used to document public record information requests regarding any SRBA claim or claims. The form may also be used to document IDWR communications requesting information regarding any SRBA claim or claims when the request is not made in writing or the claim verification report is not readily available to document the request. This form is to be filed in all relevant claim files or a central office file.

IDWR Employee/Agent Frank Hitchcock

January 22, 1997 9:12am

NAME:
PETER GRUSH

RE:
DOM WELLS-RESEARCH FOR
FCS-TF; LORI KLEMANN.

RECD NOTES FROM LORI VIA FRONT DESK-RESEARCH FOR DOM WELLS-GRUSH-
LEGALS ROVIDED. TT LORI-PROBABLY WON'T GET TO THIS TODAY DUE TO
MTG AND REQUESTS ALREADY-12:30 PM-OK. SUGGESTED CALL ME B4 10 AM
TOMMORROW,

01-22-1997: COMPLETED RESEARCH AND SCREENS PRINTS. TT AT 9:10. SHE WILL PICK UP WHEN IT STOPS SNOWING. ALL DOCS TO FRONT DESK-CM TARA.

A43-10445
A43-10450

