

AJ5856NP

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

DATE: AUG-18-1997

PAGE: A-215

RIGHT NUMBER: 43-10475

NAME & ADDRESS: S N SMITH
BEULHA SMITH
BOX 61
MALTA ID 83345

SOURCE: GROUNDWATER

QUANTITY: 0.06 CFS

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

PRIORITY DATE: 01/01/1920

POINT OF DIVERSION: T13S R26E S01 SESENW Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.02 CFS
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T13S R26E S01 SENW

DOMESTIC Within CASSIA County
T13S R26E S01 SENW

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. 13S26E015900A
STOCKWATER, 3 HORSES, 2 BEEF, 6 HOGS

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-220

RIGHT NUMBER: 43-10475

NAME & ADDRESS: S N SMITH
BEULHA SMITH
BOX 61
MALTA ID 83345

SOURCE: GROUNDWATER

QUANTITY: 0.06 CFS

PRIORITY DATE: 01/01/1920

POINT OF DIVERSION: T13S R26E S01 SESENW Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.02 CFS
	DOMESTIC DOMESTIC, 1 HOME; STOCKWA	01-01 12-31	0.04 CFS

PLACE OF USE:	STOCKWATER	Within CASSIA County
	T13S R26E S01	SENW
	DOMESTIC	Within CASSIA County
	T13S R26E S01	SENW

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

PARCEL NO. 13S26E015900A

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim data entry by: KST
Date: 8/14/97
Data entry verified by: TM
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: A43-10475
Date Received: 6/07/1989
Receipt No: S008098
Received By: G.V. 21

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: S. N. SMITH
Address: BOX 61
MALTA, ID 83345

AND/OR

Name: BEULHA SMITH
Address: BOX 61
MALTA, ID 83345

2. Date of Priority: JAN 01, 1920

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	1	SE	SE	NW		CASSIA

5. Description of diverting works:
8" X 130' WELL, 3/4 HP 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		
STOCKWATER	01/01	12/31	0.020		

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

A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE, S/11 - 3 HORSES, 2 BEEF, & 6 HOGS.

A43-10475

Page 1

Date: 06/30/89

MICROFILMED
MAR 05 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
13S	26E	1	SE NW		DOMEST	
			SE NW		STOCK	

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. A43-10475Date Received 6-7-89Receipt Number 5008098

RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

JUN 7 1989
Department of Water Resources
Southern Region Office

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) SN Smith & or Beulah Smith Phone () _____Mailing Address MALTA Idaho Box 61 Zip 833452. Date of Priority (Only one per claim) JAN 1 1920 Month/Day/Year3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 13 Range 26Section 1, SE 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, BM.,County of CASIA

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, 130' deep 8 inch casing
WATER STANDS AT 20' 3/4 A.P.

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

For DOMESTIC purposes from Jan 1st to Dec 31 amount 0.04 (cfs)
(Both dates are inclusive)

For LIVE STOCK purposes from Jan 1st to Dec 31 amount 0.02

7. Total quantity claimed 0.06 (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) ONE HOUSE 2 beef 3 horses 6 Hog

MICROFILMED

MAR 15 1989

10. Place of use is: Township: 13 Range 26

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

County of CASIA 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? CASIA

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

Number of Attachments _____

no Docket sheet,

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

Signature of Claimant (s) SN Smith Date MAY 24

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

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 _____ }
County of Cassia } ss. 519-30 9472

Subscribed and sworn (or affirmed) before me this 24 day of May 1989

SEAL

Notary Public Bruce A. [Signature]

Residing at Boise, Idaho

My Commission Expires 4/11/95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 15 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

.Aug. 25, 1989

Re: A43-10475

.S N SMITH
.BOX 61
.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 you claim(s), please contact this office.

Yours truly,

A handwritten signature in cursive script, appearing to read 'Judy'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 05 1993

05/10/2001

**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: June 15, 2001

Water right number: 43-10475

BEULHA SMITH
PO BOX 61
MALTA ID 83342

S N SMITH
PO BOX 61
MALTA ID 83342

RECEIVED
JUN 13 2001
Department of Water Resource
Southern Region

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

 I AGREE with this proposed recommendation: no changes need to be made.

DATE: 6-5-2001

SIGNATURE:

Beulha Smith + Samuel N Smith

Please print your name: Beulha Smith + SAMUEL N SMITH

IDWR Regional Office, 1341 Fillmore St, Suite 200, Twin Falls, ID 83301, (208)736-3033

