

AJ5856NP

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

DATE: AUG-18-1997
PAGE: A-263

RIGHT NUMBER: 43-10577

NAME & ADDRESS: CLAIR ROBINSON
PO BOX 644
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: 07/18/1978

POINT OF DIVERSION: T13S R26E S01 SENESW 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 S01 SENE

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. RP000120020100

Claim proofread by: KT

Date: 9-4

AJ5856NP

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

DATE: AUG-8-1997
PAGE: A-270

RIGHT NUMBER: 43-10577

NAME & ADDRESS: CLAIR ROBINSON
PO BOX 644
MALTA ID 83342

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 07/18/1978

POINT OF DIVERSION: T13S R26E S01 SENESW 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 S01 SENE

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

PROPERTY ALSO KNOWN AS RAFT RIVER SUBD LOT 10, BLOCK 2
PARCEL NO. RP000120020100

-copy to cmr

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

Claim data entry by: KS T
Date: 8/15/97
Data entry verified by: THL
Date: 8-15-97

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: A43-10577
Date Received: 7/11/1989
Receipt No: S008503
Received By: SEC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CLAIR ROBINSON 208-645-2424
Address: P.O. BOX 644
MALTA, ID 83342

2. Date of Priority: JUL 18, 1978

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

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

5. Description of diverting works:
WELL AND 3/4 HP SUBM. 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 HOUSE

10. Place of Use:

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

11. Place of use in counties: CASSIA

A43-10577

Page 1

Date: 07/11/89

MICROFILMED
MAR 05 1993

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

13. Other Water Rights Used:

NONE

14. Remarks:

RAFT RIVER SUBD. LOT 10, BLK. 2.

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

CIVIL CASE NUMBER: 39576

Identification No. A43-10577

Date Received _____

Receipt Number 5008503 *Sec*NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JUN 5 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.

RECEIVED

JUL 10 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Clair Robinson Phone (208) 645-2424Mailing Address Box 644 Malta Id Zip 833422. Date of Priority (Only one per claim) July 18 - 1978 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____

which is tributary to (b) _____ Name or kind of source

4. Location of point of diversion is: Township 13 S Range 26 E BMSection 1, SE 1/4 of NE 1/4 of SW 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. deep well 73ft - 3/4 HP submersible pump & casing piped to house

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

For domestic purposes from JAN 1 ^{Month/Day} to Dec 31 ^{Month/Day} amount 0.04 ^(cfs)For dom. purposes from JAN 1 ^(Both dates are inclusive) to Dec 31 amount 0.04

7. Total quantity claimed _____ (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) _____

MICROFILMED

MAR 05 1993

10. Place of Use Is: Township: 13 S Range 26 E BM

Section 1, SE 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 _____

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 X 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 (X)

14. Remarks: RATE River Subdivision LOT 10 BLOCK 2

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 _____

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) Clair Robinson Date 7-7-89

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.

Subscribed and sworn (or affirmed) before me this 7th day of July 19 89

SEAL

Notary Public Rosella Redden

Residing at Maeta, Idaho

My Commission Expires April 6 1993

Last Name Robinson 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

June 28, 1989

Clair Robinson
Box 644
Malta, ID 83342

RECEIVED

JUL 10 1989

Department of Water Resources
Southern Region Office

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 923 for \$ 25.00 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

- () Item #2 Priority date (day/month/year)
- () Item #4 Point of Diversion Legal Description
- () Item #6 Uses descriptions
- () Item #9 Description of Non-irrigation uses
- () Item #10 Place of Use ~~Legal Description~~
- (✓) Item #16 Signature & Notarization
- () Improper fee (THE CORRECT FEE IS \$ _____)
- () Other or Remarks

If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional late fee of \$ 50.00.

Sincerely,

Steve Clelland
Water Right's Agent

enc:

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

June 19, 1989

RECEIVED

JUL 10 1989

Department of Water Resources
Southern Region Office

RECEIVED

JUN 27 1989

Department of Water Resources
Southern Region Office

Clair Robinson
Box 644
Malta, ID 83342

RE: SRBA Claim

Dear Claimant:

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- ☐ Item #10 Place of Use Legal Description
- ☐ Item #16 Signature & Notorization
- ☒ Improper fee (THE CORRECT FEE IS \$ 25.00)
- ☐ Other or Remarks

~~If you wish to continue to press your claim please find enclosed instructions and another claim form to use.~~ If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional late fee of \$ 50.00.

BEFORE RETURNING THE CLAIM PLEASE READ THE ENCLOSED DRAFT TEXT FOR D&S BROCHURE. Due to recent rulings by the court you may defer filing the claim if you so desire but it is recommended by the Department that you continue to press your claim. If you have any questions contact our office.

Sincerely,

Bob Worstell

Bob Worstell
Water Resource Agent

Encl:

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

• Sept. 11, 1989

Re: A43-10577

• CLAIR ROBINSON
• P O BOX 644
• 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,

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

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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

June 28, 1989

Clair Robinson
Box 644
Malta, ID 83342

A43-02369
10577
04042

RE: SRBA Claim

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Sincerely,

Steve Clelland
Water Right's Agent

enc:

WATER RIGHT NUMBER - A43-10577

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - LAST NAME - - - - +

+ - FIRST NAME - - +

+ - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***

ROBINSON

CLAIR

1 - P.O. BOX 644

2 -

3 -

CITY- MALTA

PHONE - 208-645-2424

STATE- ID ZIP- 83342

+ - - PRIORITY DATE - - +

07/18/1978

+ - - REGION - - +

17 SOUTHERN

+ - - STAGE - - +

J - BENEFICIAL USE

+ - - SOURCE - - - - +

GROUNDWATER

+ - - - - TRIBUTARY - - - - - +

+ - - - - POINT OF DIVERSION - - - - - +

TWN RNG SEC TRACT LOT RPLG COUNTY

STREAM INDEX (BLANK IF NO INDEX CODE)

13S 26E 1 SE NE SW (31) CASSIA

+ - - - - DESCRIPTION

CODE

43 - DOMESTIC

01/01 12/31 0.040

+ - - - - WATER USE - - - - - +

PERIOD FROM PERIOD TO

DIVERSION RATE DIVERSION VOLUME

+ - - TOTAL DIV. RATE - +

0.040

+ - - TOTAL DIV. VOLUME - +

+ - - TOTAL DIV. CAPACITY - +

+ - - TOTAL CONSUMPTIVE USE - +

+ - - KW USAGE - +

+ - - - - TRACT LOT ACRES

TWN RNG SEC

13S 26E 1 SE NE

43 DOMESTIC

PLACE OF USE - - - - - +

DESCRIPTION

COUNTY

(31) CASSIA

+ - - DIVERSION MEANS - WELL AND 3/4 HP SUBM. PUMP

+ - - NON-IRRIGATION USE - D/I HOUSE

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - REMARKS - - - - - +

RAFT RIVER SUEO. LOT 10, BLK. 2.

+ - - - - OLD WATER RIGHT NUMBERS - - - - - +

NO OLD WATER RIGHT NUMBERS FOUND.

+ - - - - CONDITIONS OF APPROVAL - - - - - +

NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - +

+ - - - - DECREE DEFENDANT - - - +

+ - - DECREE DATE - +

00/00/0000

+ - - AUDIT FIELDS - 07/11/89 CLELLAND

