

MAR-07-1997
0013

1

RIGHT NUMBER:

71-10050

NAME AND ADDRESS:

VELMA A COX
RT 3 SKYLINE DR
ROUTE 3 SKYLINE DRIVE
TWIN FALLS ID 83301

SOURCE:

GROUNDWATER

QUANTITY:

0.04 CFS

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

PRIORITY DATE:

01/01/1966

POINT OF DIVERSION:

T09N R14E S29

NENW

Within CUSTER County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
DOMESTIC 1 HOME

PERIOD OF USE
01-01 12-31

QUANTITY
0.04 CFS

PLACE OF USE:

DOMESTIC
T09N R14E S29

Within CUSTER County
NENW

OTHER MATTERS 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. RP09S14E292430

Old (D) Number -

+ - - - - Address

1 - RT 3 SKYLINE DR

City- TWIN FALLS
Phone - 208-733-4951

297

+ - - Stage - -
J - BENEFICIAL USE

+ - - - - Tributary

Diversion Name

(37) CUSTER

----- Diversion Rate ----- Diversion Volume -----

0.040

Description	County
-------------	--------

43 DOMESTIC

PUMP HOUSE & PUMP.

- 1 HOME

Use - NONE.

6/9/20

PARCEL NO. RP09S14E292430

- - - Old Water Right Numbers - -
No Old Water Right Numbers found.

----- Conditions of Approval -----

N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.

N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

+ - Decree Date - +
00/00/0000+ - Decree Date - +
00/00/0000

.....-Comments-.....

CONDITION CODES N11 AND N13 ADDED IF NOT ALREADY PART OF RECORD.

Notes and Flags Area

Court Report Filing	- 00/00/0000	Field Inspection Made	- 00/00/0000	Civil Case Number	-
Objection Filed Date	- 00/00/0000	Field Inspection Flag	-	Old Case Number	-
Response Filed Date	- 00/00/0000	Verified Date	- 00/00/0000	Old Judicial District	-
Claim Received Date	- 02/15/1989	Last Amended Date	- 00/00/0000	Temporary Right	- P
Proof Due Date	- 00/00/0000	Proof Made Date	- 00/00/0000	Water District	-
Licensed Date	- 00/00/0000	Receipt Number	- S006306	Federal/State Indicator	- S
		POU Ownership Flag	- Y	Presumption Flag	-
		Name Connector	-	Notice of ErrorFlag	-

JUN-28-1995
0258

1

RIGHT NUMBER	NAME & ADDRESS	PRIORITY DATE	PURPOSE OF USE	PERIOD OF USE FROM TO	MAXIMUM QUANTITY	BASIS OF CLAIM
71-10050	VELMA A COX RT 3 SKYLINE DR ~~ROUTE 3 SKYLINE DRIVE~~ TWIN FALLS ID 83301	01/01/1966	DOMESTIC	01-01 12-31	0.04	CFS BENEFICIAL USE
NON-IRRIGATION USES: DOMESTIC, 1 HOME ~~W/1 HOUSE~~						
SOURCE: GROUNDWATER						
POINT OF DIVERSION: T09N R14E S29 NENW						
PLACE OF USE: DOMESTIC T09N R14E S29 NENW						
REMARKS: PARCEL NO. RP09S14E292430						

TOTAL QUANTITY: 0.04 CFS

TRIBUTARY:

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: A71-10050
Date Received: 2/15/1989
Receipt No: S006306
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: VELMA A. COX 208-733-4951
Address: ROUTE 3, SKYLINE DRIVE.
TWIN FALLS, ID 83301

2. Date of Priority: JAN 01, 1966

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
09N	14E	29	NE	NW			CUSTER

5. Description of diverting works:
60' WELL WITH PUMP HOUSE & 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/l HOUSE.

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
09N	14E	29	NE	NW		DOMEST	

11. Place of use in counties: CUSTER

A71-10050

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Date: 02/16/89

MICROFILMED
MAR 17 1993

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

13. Other Water Rights Used:
NONE.

14. Remarks:
TRACTS 1299, ON US HWY #93 (STATE HWY #75), JUST NORTH OF
COMMUNITY OF OBSIDIAN.

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

Ident. Number A71-10050

Date Received 9-22-88

Receipt Number 5006306

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

RECEIVED

SEP 22 1988

Department of Water Resources
Southern Region Office

Please type or print clearly

1. Name of Claimant (s) VELMA A. COX Phone 208 733-4951

Mailing Address Rt 3 SKYLINE DR, Twin Falls, ID. Zip 83301

2. Date of Priority (Only one (1) per claim) JAN 01, 1966

3. Source of water supply (a) well Groundwater
which is tributary to (b) —

4. Location of point of diversion is: Township 9N Range 14E
Section 29, TRACTS 1299 1/4 of NE 1/4 of NW 1/4, Govt. Lot —, B.M.,
County of CLUSTER

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 60 ft. deep
with pumphouse + pump.

6. Water is claimed for the following: (Limited to Domestic and/or Stockwater only. See Instructions)
(Both dates are inclusive) (cfs)

For DOMESTIC purposes from JAN 1 to DEC 31 amount 0.04

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; Stockwater: Type and number of
livestock) ONE HOUSEHOLD SERVED

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MAR 17 1993

North

10. Place a "D" for domestic and "S" for stockwater use in the corresponding place of use below.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
9N	14E	29					D	~~S~~			D							

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

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.
_____ or None (X)

14. Remarks: Tracts 1299, On US Hwy 93 (State Hwy 75) North Part of Obsidian Community

15. Basis of Claim (check one) Beneficial Use X Posted Notice License Permit
Decree

If applicable provide IDWR Water Right Number

Court Case Number Decree Date

Plaintiff vs Defendant

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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 0

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

Signature of Claimant (s) Velma A. Cox Date 8/23/88
_____ 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 _____

Title and Organization _____ Date _____

State of Idaho/or _____)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this _____ day of _____ 19 88

SEAL

Notary Public Ken D. Egan

Residing at Twin Falls

My Commission Expires Life

Last Name Cox Ident No. _____

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MAR 17 1993

Copies Made State, 100 per Claimant



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

February 7, 1989

Velma Cox
Rt. 3 Box 6569
Skyline Acres
Twin Falls, ID 83301

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your check # 818 for
\$ 50.00 which you submitted to our office. I am returning
these pursuant to Rule 10,4 of the Department's Adjudications Rules and
Regulations. In checking your claim it appears that the following
items need clarification:

- [] Item #2 Priority
- [X] Item #4 Point of Diversion Legal Description
- [] Item #6 Uses descriptions
- [] Item #9 Description of Non-irrigation Uses
- [X] Item #10 Place of Use Legal Description
- [] Item #16 Signature & Notorization
- [] Improper fee (THE CORRECT FEE IS \$ _____)
- [] 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,

Allen Merritt
Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

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MAR 17 1993

