

APR-01-1997
0020

1

RIGHT NUMBER: 71-10637

NAME AND ADDRESS: LOUISE ALMGREN
CLARK R ALMGREN
PO BOX 402
DEL MAR CA 92014

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 10/12/1990

POINT OF DIVERSION: T10N R13E S08 SENW Within CUSTER County

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

PLACE OF USE: DOMESTIC T10N R13E S08 SENW Within CUSTER County

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. 00075000320
PROPERTY IS ALSO KNOWN AS LOT 32, STANLEY BASIN SUBDIVISION.

RE

Water Right Number - R71-10637 Prefix Translation: RESEARCH Old (D) Number -

*** C - CURRENT OWNER *** ALMGREN LOUISE 1 - PO BOX 402 2 - 3 - State- CA Zip- 92014 City- DEL MAR Phone - 619-481-0388 1 - PO BOX 402 2 - 3 - State- CA Zip- 92014 City- DEL MAR Phone - 619-481-0388

Priority Date 10/12/1990 Region 17 SOUTHERN Stage J - BENEFICIAL USE Status - - - - - Source GROUNDWATER Tributary - - - - -

Point of Diversion				Diversion Name			
Twn	Rng	Sec	Tract	Lot	Rflg	County	Diversion Name
10N	13E	8	SE NW		(37)	CUSTER	
Code				Description		Period From	
43 - DOMESTIC				Water Use		Period To	
43 - DOMESTIC				01/01		12/31	
43 - DOMESTIC				0.040		0.040	
Total Div. Rate				Total Div. Volume		Total Div. Capacity	
0.040				+ -		+ -	
Total Div. Rate				Total Div. Volume		Total Div. Capacity	
0.040				+ -		+ -	
Total Div. Rate				Total Div. Volume		Total Div. Capacity	
0.040				+ -		+ -	

Place of Use				Description			
Twn	Rng	Sec	Tract	Lot	Acres	Code	County
10N	13E	8	SE NW		43	DOMESTIC	(37) CUSTER
Diversion Means - WELL 55' DEEP, 8" CASING, 1/2 HP SUBMERSIBLE PUMP PLUS HAND PUMP							
Non-Irrigation Use - 1 HOME							
Other Rights for Same Use - NONE							

EXP PARCEL NO. 000750000320 PROPERTY IS ALSO KNOWN AS LOT 32, STANLEY BASIN SUBDIVISION. No Old Water Right Numbers found.

OK [Signature]

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	- 04/30/1992	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	- C023991	Federal/State Indicator	- S
		PDU Ownership Flag	- Y	Presumption Flag	-
		Name Connector	- AND/OR	Notice of Error Flag	-

RIGHT
NUMBER 71-10637

NAME & ADDRESS	PRIORITY DATE	PURPOSE OF USE	PERIOD OF USE FROM TO	MAXIMUM QUANTITY	BASIS OF CLAIM
----------------	------------------	----------------	--------------------------	---------------------	----------------

CLARK R ALMGREN
LOUISE ALMGREN
PO BOX 402
DEL MAR CA 92014

10/12/1990 DOMESTIC

01-01 12-31

0.04 CFS

BENEFICIAL USE

NON-IRRIGATION USES:
DOMESTIC, 1 HOME

SOURCE: GROUNDWATER
POINT OF DIVERSION:

T10N R13E S08 SENW

PLACE OF USE: DOMESTIC
T10N R13E S08 SENW

REMARKS: PARCEL NO. 000750000320

PROPERTY IS ALSO KNOWN AS LOT 32, STANLEY BASIN SUB-DIVISION.

TOTAL QUANTITY: 0.04 CFS

Handwritten signature and date 6/15/95

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: **A71-10637**
Date Received: 4/30/1992
Receipt No: C023991
Received By: _____

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

1. Name: CLARK R ALMGREN 619-481-0388
Address: PO BOX 402
DEL MAR CA 92014

AND/OR
Name: LOUISE ALMGREN 619-481-0388
Address: PO BOX 402
DEL MAR CA 92014

2. Date of Priority: OCT 12, 1990

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10N	13E	8	SE	NW			CUSTER

5. Description of diverting works:

WELL 55' DEEP, 8" CASING, 1/2 HP SUBMERSIBLE PUMP PLUS HAND 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:

DOMESTIC, 1 HOME

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10N	13E	8	SE	NW		DOMEST	

11. Place of use in counties: CUSTER

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

13. Other Water Rights Used:
NONE

14. Remarks:

PROPERTY IS ALSO KNOWN AS LOT 32, STANLEY BASIN SUB-DIVISION.

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 _____

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MAR 17 1993
Date: 05/12/92

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: A71-10637
Date Received: 4/30/1992
Receipt No: C023991
Received By: _____

MAY 05 1992

MAY 08 1992

Department of Water Resources
Southern Region Office

Department of Water Resources
Southern Region Office

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

1. Name: CLARK R ALMGREN 619-481-0388
Address: PO BOX 402
DEL MAR CA 92014

AND/OR

Name: LOUISE ALMGREN 619-481-0388
Address: PO BOX 402
DEL MAR CA 92014

2. Date of Priority: OCT 12, 1990

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10N	13E	8		SE	NW		CUSTER

5. Description of diverting works:
WELL 55' DEEP, 8" CASING, 1/2 HP SUBMERSIBLE PUMP PLUS HAND 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:
DOMESTIC, 1 HOME

A71-10637

A71-10637 Almgren

SNRA Lot #32
add subdivision lot # (on
original paper claim - pls. add
& print a new claim and send
him a copy. Remarks: J01 (Gred 3)
✓ 5/12/92

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10N	13E	8	SE NW		DOMEST	

11. Place of use in counties: CUSTER

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. A71-10637Date Received 4-30-92Receipt Number C023991

RECEIVED
APR 30 1992

**NOTICE OF CLAIM
TO A
WATER RIGHT**

RECEIVED

MAY 08 1992

Department of Water Resources

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Department of Water Resources

Where Daily Use is less than 13,000 gallons per day. Southern Region Office

Filing Fee \$25

Please type or print clearly

- Name of Claimant (s) Clark R. and/or Louise ALMGREN Phone (619) 481-0388 or 208-774-2268
Primary Mailing Address PO BX 402, Del Mar, CA 92014 Zip 92014
Secondary: PO BX 311, Stanley, ID 83278
- Date of Priority (Only one per claim) 12 OCT 90 Month/Day/Year
- Source of water supply (Check one) ☒ Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source
- Location of point of diversion is: Township T.10 N. Range R.13 E.
Section 8, XXXXXXXXXX of SE 1/4 of NW 1/4, Govt. Lot _____, BM., division _____
(Section 8, T.10 N. R.13 E., RM, Custer County, Idaho)
County of Custer
- Additional points of diversion if any: _____
- 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, 8" CASING, 55' DEEP, 1/2 H.P. SUBMERSIBLE PUMP PLUS HAND PUMP, PIPE TO LOG HOME.
- Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For DOMESTIC purposes from 1 JANUARY to 31 DECEMBER amount 0.04 cfs
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____
- Total quantity claimed 0.04 cfs (cfs)
- Total consumptive use claimed is de minimus
- Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) ONE HOUSEHOLD

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10. Place of use is: Township: _____ Range _____

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

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? CUSTER

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

(X) None or _____

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

4-27-92

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 _____

Title

of _____

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 CALIFORNIA)

) SS.

County of SAN DIEGO)

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 27th day of APRIL 19 92

Notary Public

Geraldine Yee

Residing at

1435 Camino Del Mar Del Mar CA

My Commission Expires

February 2, 1996

92014

Last Name

YEE

Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 17 1993





Lu Almgren
P.O. Box 402
Del Mar, CA 92014

MAR 17 1993

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Fold at line over top of envelope to the
right of the return address

CERTIFIED

P 046 311 966

MAIL

Adjudication Bureau
Department of Water Resources
1301 N. Orchard
State House Mail
Boise, Idaho 83720

FIRST CLASS MAIL



ADJUDICATION CLAIM REVIEW CHECKLIST

4-3-91

CLAIMANT'S NAME Almgren, Clark R. / LouiseCLAIM IDENT. NO. AI-10637DATE RECEIVED 04-30-92RECEIPT # C023991AMOUNT \$ 25.00

- | | YES | NO | Required Info? |
|---|-------------------------------------|--------------------------|----------------|
| 1. Is the name and address complete with zip code? | ☒ | ☐ | * |
| 2. Is a priority date entered? | ☒ | ☐ | * |
| Is the priority date acceptable in view of mandatory filing dates? | ☒ | ☐ | * |
| See Adjudication Memos #1 and #4 to determine if a Permit is required. | ☒ | ☐ | * |
| 3. (a) Is a source entered? | ☒ | ☐ | * |
| (b) Is a tributary to entered? (if required) | ☒ | ☐ | * |
| 4. Is the legal description of the p.d. sufficient? | ☒ | ☐ | * |
| 5. Is there a description of the diverting works? | ☒ | ☐ | * |
| 6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form | ☒ | ☐ | * |
| Is the period of use included? | ☒ | ☐ | * |
| Is a quantity claimed for each use? | ☒ | ☐ | * |
| 7. Is a total quantity claimed entered? | ☒ | ☐ | * |
| 8. If required is a consumptive use entered? | ☒ | ☐ | * |
| Is the consumptive use correct? | ☒ | ☐ | * |
| 9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4 | ☒ | ☐ | * |
| 10. Is (are) the place(s) of use and purpose(s) indicated? | ☒ | ☐ | * |
| 11. Is (are) the county(ies) entered? | ☒ | ☐ | * |
| 12. Is the ownership of p.u. checked? | ☒ | ☐ | * |
| 13. Are other water rights listed or "none" indicated?
(See Item No.'s 16 & 17 for checking other water rights) | ☒ | ☐ | * |
| 14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) | ☒ | ☐ | * |
| 15. Is the basis of the claim indicated? | ☒ | ☐ | * |
| 16. If the basis of claim is shown as license, permit, or decree is the existing water rt. no. listed?
(Compare claim with the existing water rt. and either attach a proof report or state in comments that the existing right was compared to the claim) | ☒ | ☐ | * |
| 17. If the basis of claim is shown as beneficial use, or not marked, are there existing water rights shown in our records using the legal desc. or name on the claim?
(If yes, describe the right in "Comments" and attach a proof report) NOTE: If the claim is for dom/stock this check is not as necessary unless it is located within an area where dom/stock rights were decreed. | ☒ | ☐ | * |
| 18. If the claimant requested a monthly docket sheet, is payment enclosed?
(If yes, describe payment status in "Comments" below.) | ☒ | ☐ | * |
| 19. Is the claim signed by the claimant, and is the signature appropriate?
Organizations must complete the organization block. | ☒ | ☐ | * |
| 20. Has the claim been signed, sealed, and dated by a notary? | ☒ | ☐ | * |
| 21. Was this claim filed on time, or was an extension granted? | ☒ | ☐ | * |
| 22. Is the fee enclosed correct? | ☒ | ☐ | * |

Exempt

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MAR 17 1993

mod.

1. Should this claim be data entered? ☒

Claim reviewed by: af

Date 5-1-92

Claim data entered by: af

Date 5-1-92

Claim is being returned to claimant: ☒ (Yes) ☐ (No)

Claimant is being notified of modifications: ☒ (Yes) ☐ (No)

Comments: _____



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000
Phone: (208) 327-7900 FAX: (208) 327-7866

May 4, 1992

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

Mr. & Mrs. Clark R. Almgren
P.O. Box 402
Del Mar, CA 92014

RE: Snake River Basin Adjudication (SRBA)
Custer County - Notice of Claim #A71-10637

Dear Mr. & Mrs. Almgren:

We are forwarding to you a data-entered copy of the claim you filed in the Snake River Basin Adjudication. We are also enclosing your receipt #C023991. Please retain this receipt for your records.

We have interpreted the data from this claim in the process of data entry in a manner which we feel more accurately reflects the true status of this water right. The items that were modified are highlighted. Please review the enclosed claim to assure that these modifications are in agreement with this water right.

If you believe our data is incorrect, and you wish to make any changes to this Notice of Claim, initial the changes before signing the form, have your signature notarized, and return it to this office within 30 days. If you believe the modifications are correct, you may retain this copy of your claim for your records.

Please feel free to contact this office if you have any questions.

Sincerely,

Roxanne McCarthy
Sr. Water Resource Agent
Adjudication Bureau

RM:sf:west
Enclosures:
Notice of Claim to a Water Right

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MAR 17 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

12-May-1992

CLARK R ALMGREN
LOUISE ALMGREN
PO BOX 402
DEL MAR CA 92014

RE: A71-10637

Dear Mr. and Mrs. Almgren;

In response to your request for a correction on your claim A71-10637, I have made the correction and added your Lot # and Sub-division name. I have enclosed a copy of the revised claim for your records (find the corrections in the "REMARKS" section of your claim on the second page).

If you have any questions or need further assistance in this matter, please feel free to contact our office.

Respectfully,

A handwritten signature in cursive script, appearing to read 'Jeanie', written over the typed name.

Jeanie Robertson
Records Clerk

/jr
Enclosures

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MAR 17 1993

WATER RIGHT NUMBER - A71-10637

PREFIX TRANSLATION: ADJUDICATION CLAIM

CID (CD) NUMBER -

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

+ - FIRST NAME - - +

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

*** C - CURRENT OWNER ***

ALMGREN

CLARK R

1 - PO BOX 402

2 -

3 -

CITY- DEL MAR

PHONE - 619-481-0388

1 - PO BOX 402

2 -

3 -

STATE- CA

ZIP- 92014

ALMGREN

LOUISE

CITY- DEL MAR

PHONE - 619-481-0388

STATE- CA

ZIP- 92014

+ - - PRIORITY DATE - - +

10/12/1990

+ - - REGION - - - +

17 SOUTHERN

+ - - STAGE - - - +

J - BENEFICIAL USE

+ - - STATUS - - - - +

+ - - SOURCE - - - - +

GROUNDWATER

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

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

TWN RNG SEC TRACT LOT RFLG COUNTY

STREAM INDEX (BLANK IF NO INDEX CODE)

10N 13E 8 SE NW

(37) CUSTER

+ - - - - DESCRIPTION

CODE

PERIOD FROM PERIOD TO

WATER USE

DIVERSION RATE

DIVERSION VOLUME

43 - DOMESTIC

01/01 12/31

0.040

+ - - TOTAL DIV. RATE - +

0.040

+ - - TOTAL DIV. VOLUME - +

+ - - TOTAL CONSUMPTIVE USE - +

0.0

+ - - KW USAGE - +

+ - - - - TOWN

10N

13E

8

SE NW

43 DOMESTIC

DESCRIPTION

COUNTY

(37) CUSTER

+ - - DIVERSION MEANS - WELL 55' DEEP, 8" CASING, 1/2 HP SUBMERSIBLE PUMP PLUS HAND PUMP

+ - - NON-IRRIGATION USE - DOMESTIC, 1 HOME

+ - - OTHER RIGHTS FOR SAME USE - NONE

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

PROPERTY IS ALSO KNOWN AS LOT 32, STANLEY BASIN SUB-DIVISION.

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

NO OLD WATER RIGHT NUMBERS FOUND.

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

NO CONDITIONS OF APPROVAL FOUND.

MICROFILMED

MAR 17 1993

