

AJ5856NP

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

DATE: SEP-29-1997
PAGE: A-75

RIGHT NUMBER: 41-10141

NAME & ADDRESS: NORMAN K MOSS
LOLA R MOSS
PO BOX 214
ROCKLAND ID 83271-0214

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

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

PRIORITY DATE: 12/31/1930

POINT OF DIVERSION: T10S R31E S06 SWSEW Within POWER County

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

PLACE OF USE: DOMESTIC Within POWER County
T10S R31E S06 SESW

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. RP 80122-00.

DATE: 07/15/97
PAGE: 173

ROCKLAND ID 832710214
(208) 548-2391

Stage: BENEFICIAL USE

POWER County

SE

105 31E 6 :

0

[1 HOUSE]

exp 10.

211
213

9/18/97

DATA ENTERED BY SW
DATE 9-24-97

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: A41-10141
Date Received: 4/05/1990
Receipt No: E012875
Received By: SCC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: NORMAN K. MOSS 208-548-2391
Address: P.O. BOX 214
ROCKLAND, ID 83271

OR

Name: LOLA R. MOSS 208-548-2391
Address: P.O. BOX 214
ROCKLAND, ID 83271

2. Date of Priority: DEC 31, 1930

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	31E	6	SW	SE	SW		POWER

5. Description of diverting works:
WELL

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
10S	31E	6	SE SW		DOMEST	

11. Place of use in counties: POWER

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 _____

MICROFILMED
MAR 02 1993

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. A41-10141

Date Received 4-5-90

Receipt Number E012875

OK#1111 25⁰⁰ of 50⁰⁰

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

APR - 5 1990

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

Department of Water Resources
Eastern District Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) NORMAN K. OR. LOLA R. MOSS Phone (208) 548-2391

Mailing Address Box 214 Rockland, IDAHO Zip 83271

2. Date of Priority (Only one per claim) 1930 more or less Month/Day/Year

3. 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 10 South Range 31 E.

Section 6, SW 1/4 of SE 1/4 of SW 1/4, Govt. Lot _____, BM.,
(Tax No. 22)

County of Power

Additional points of diversion if any: none

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

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

For domestic purposes from January 1 to December 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

MICROFILMED

MAR 02 1993

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership, Stockwater: Type and Number of livestock) one household

10. Place of use is: Township: 10 S Range 3 E.

Section 6, SE 1/4 of SW 1/4, Govt. Lot _____, B.M.,

County of Power 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? POWER

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.

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 XX 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) Norman K. Moss Date April 3/90

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

of _____, that I have signed the foregoing

document in the space below as _____ of _____

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 Power) SS.

Subscribed and sworn (or affirmed) before me this 3 day of April 1990

SEAL

Notary Public Betty Joyce Scherer

Residing at Am. Falls, Idaho

My Commission Expires is for Life

Last Name Moss, Norman K Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 02 1993



DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. E, Twin Falls, Idaho 83301

(208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

.Apr. 13, 1990

Re: A41-10140

A41-10141

.NORMAN K MOSS
.P O BOX 214
.ROCKLAND ID 83271

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,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 02 1993

WATER RIGHT NUMBER - A41-10141

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

[illegible]

*** C - CURRENT OWNER ***
MOSS

NORMAN K.

1 - P.O. BOX 214
2 - -
3 - -

CITY - ROCKLAND
PHONE - 208-548-2391
STATE- ID ZIP- 83271

STATE- ID ZIP- 83271

MDS S

LOLA R.

CITY- ROCKLAND
PHONE - 208-548-2391

STATE- ID ZIP- 83271

[illegible][illegible]

GROUNDWATER

[illegible]

10S	31E	6	SW SE SW	(77)	POWER
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+---	CODE	DESCRIPTION	PERIOD FROM	WATER USE PERIOD TO	DIVERSION RATE	DIVERSION VOLUME
------	------	-------------	-------------	---------------------	----------------	------------------

+3 - DOMESTIC

01/01

12/31

0.040

[illegible]

0.040.0

TWN	RNG	SEC	TRACT	LOT	ACRES	PLACE OF USE	DESCRIPTION	COUNTY
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10S 31E 6 SE SW

43 DOMESTIC

(77) POWER

+ - - DIVERSION MEANS - WELL

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

+ - - OTHER RIGHTS FOR SAME USE - NONE

[illegible]

+ - - - - - OLD WATER RIGHT NUMBERS - - - - -
NO OLD WATER RIGHT NUMBERS FOUND.

NO CONDITIONS OF APPROVAL FOUND.

WATER EXAMINER