

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: A41-10035
Date Received: 2/27/1990
Receipt No: ~~5011453~~ 501145
Received By: LTW AD~

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT R. SPILLETT 208-548-2254
Address: P.O. BOX 144
ROCKLAND, ID 83271

AND/OR
Name: RAE SPILLETT 208-548-2254
Address: P.O. BOX 144
ROCKLAND, ID 83271

2. Date of Priority: JAN 01, 1968

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	18	SE	SE	NE		POWER

5. Description of diverting works:
WELL, 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	0.030		

7. Total Quantity Appropriated is:
0.070 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/50-100 BEEF STOCK

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	31E	18	SE SE	NE NE	DOMEST STOCK	

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:
ROCK CREEK WATER

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
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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 A41-10035

Date Received _____

Receipt Number _____

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

Please type or print clearly

1. Name of Claimant (s) Robert R. or Rae Spillert Phone (208) 548-2254Mailing Address P.O. Box 144 Rockliff Id. Zip 832712. Date of Priority (Only one (1) per claim) 1/1/19683. Source of water supply (a) Groundwater
which is tributary to (b) _____4. Location of point of diversion is: Township 10 Range 31Section 18, SE 1/4 of NE 1/4 of NE 1/4, Govt. Lot _____, B.M.,County of Power

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

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

For DOM purposes from 1/1 (Both dates are inclusive) to 12/31 amount .04 (cfs)For stock purposes from 1/1 to 12/31 amount .037. Total quantity claimed .07 (cfs)8. Total consumptive use claimed is de minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of
livestock) D/I house 5/50-100 bf stock

MICROFILMED

MAR 02 1993

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
102	31e	18	~~NE~~			D/S												

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.
ROCK CR. WATER or None ()

14. Remarks: _____

15. Basis of Claim (check one) Beneficial Use ☒ 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 ☒
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) Russell R. Spillert Date 2-27-90
Joe Spillert Date 2-27-90

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 Tf) SS.

Subscribed and sworn (or affirmed) before me this 27th day of Feb 19 90

SEAL

Notary Public Lois White

Residing at Tf

My Commission Expires 5/94

Last Name _____ Ident No. _____

Copies White-State, Yellow-Claimant

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MAR 02 1993

41-10035

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAWDATE: SEP-24-1997
PAGE: A-18

RIGHT NUMBER: 41-10035

NAME & ADDRESS: RAE SPILLETT
ROBERT R SPILLETT
PO BOX 144
ROCKLAND ID 83271

SOURCE: GROUNDWATER

QUANTITY: 0.07 CFS

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

PRIORITY DATE: 01/01/1968

POINT OF DIVERSION: T10S R31E S18 SESENE Within POWER County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	STOCKWATER	01-01 12-31	0.03 CFS
	DOMESTIC 1 HOUSE	01-01 12-31	0.04 CFS

PLACE OF USE: STOCKWATER Within POWER County
T10S R31E S18 SENEDOMESTIC Within POWER County
T10S R31E S18 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
S/50-100 BEEF STOCK

Decreed: 7/24/98

Claim file w/scr

AJ5809NP
No. R41-10035

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 07/15/97
PAGE: 95

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	RAE SPILLETT	01/01/1968	STOCKWATER	01-01 12-31	0.03 CFS	
C	ROBERT R SPILLETT		DOMESTIC	01-01 12-31	0.04 CFS	
	PO BOX 144					
	ROCKLAND ID 83271					
	(208) 548-2254					
			TOTAL DIVERSION:		0.07 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T10S R31E S18

SESENE

POWER County

Place of use Legal Description for: STOCKWATER

NE	NE	SE	SE
T R S	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac
10S 31E 18	: S	:	:

Place of use Legal Description for: DOMESTIC

NE	NE	SE	SE
T R S	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac	: Lt Ac Lt Ac Lt Ac Lt Ac
10S 31E 18	: D	:	:

POU County: POWER

Non-Irrigation Uses: ~~DM~~ HOUSE S/50-100 BEEF STOCK

Other Rights: ROCK CREEK WATER

Dates: Exam Made Date: 7-15-94

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:

Presumption Flag:

Audit: 05/29/97 D JONES

DATA ENTERED BY: scr
DATE: 9-23-97

scr
9/18/97

N11
N13

DIVERSION RATE	DIVERSION VOLUME
0.03 CFS	
0.04 CFS	
0.07 CFS	

Stage: BENEFICIAL USE

POWER County

SE

“ “ “ “

• • • •

- DETERMINATION OF HISTORICAL BENEFICIAL USE.
- THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
- GALLONS PER DAY.

Field Inspection Flag:
Presumption Flag:

CLAIM NO. A41-10035

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
CLAIM VERIFICATION EXAM SHEET
FOR DOMESTIC AND STOCKWATER CLAIMS IN PLACE OF A CVR

1. ☒ No Change NAME:
☐ NEW OWNER: _____
☒ No Change ADDRESS:
☐ NEW ADDRESS: _____
- ☒ DATA ENTRY STANDARDS CHECKED?
2. ☒ No Change - DATE OF PRIORITY: No Field Verification Needed.
☐ CHANGE- Priority date, per claimant, is _____.
(if the priority date, based on your exam, seems questionable,
explain in COMMENTS.)
3. ☒ No Change - SOURCE:
☐ CHANGE- Different Source found: _____
4. ☒ No Change - POINT OF DIVERSION:
☐ Point of diversion is different than the claim
New P/D: Twp. _____, Rge. _____, Sec. _____, _____ 1/4 _____ 1/4 _____ 1/4

Note: If the 10-acre tract is shown on the claim, then
verification of the 10-acre parcel is needed. Otherwise the
10-acre tract is not required, unless the source is a spring.

5. ☒ No Change - DESCRIPTION OF DIVERTING WORKS:
☐ Incomplete desc., complete items missing, IF KNOWN.
HP of pump _____ Static water level _____ Well depth _____
Casing size _____ Pumping water level _____ Gravity flow _____
Method of irr. _____
6. ☒ No Change - WATER USES:
☐ Different uses, (list uses found).
Use _____ From _____ To _____ Amount _____ cfs _____ af
Use _____ From _____ To _____ Amount _____ cfs _____ af
7. ☒ No Change - TOTAL VOLUME:
☐ Change found, The new total is, -- -- -- _____ cfs _____ af
8. N/A
9. ☒ No Change - NON-IRRIGATION USES: Completed on claim
☐ Incomplete on claim - Exam found:
Domestic - No. of homes _____ Stockwater - No. of head _____
Other: _____
- ☒ DATA ENTRY STANDARDS (correct to..)

10. ☒ No Change - PLACE OF USE: (If changed, list below.)
Use Twp. Rge. Sec. 1/4, 1/4, 1/4

11. ☐ Checked: N/A

12. ☐ Checked: N/A

13. ☒ No change - OTHER RIGHTS FOR SAME USE:
☐ CHANGE: _____

14. ☒ None REMARKS: (copy existing remarks to comments in "R")
☐ Add the following standard remarks:
LIST STANDARD REMARKS FOR THE RECOMMENDATION:

15. ☒ BASIS OF CLAIM VERIFIED AS: D - L - P - S - J (circle one)

COMMENTS: (pertinent to field examination)

ATTACHMENTS: Attached to This Form. Attachments are in Permit File.

PHOTOS ☐
MAP ☒
SYSTEM DIAGRAM ☐

☐
☐
☐

DATE EXAM CONDUCTED: 7-15-94

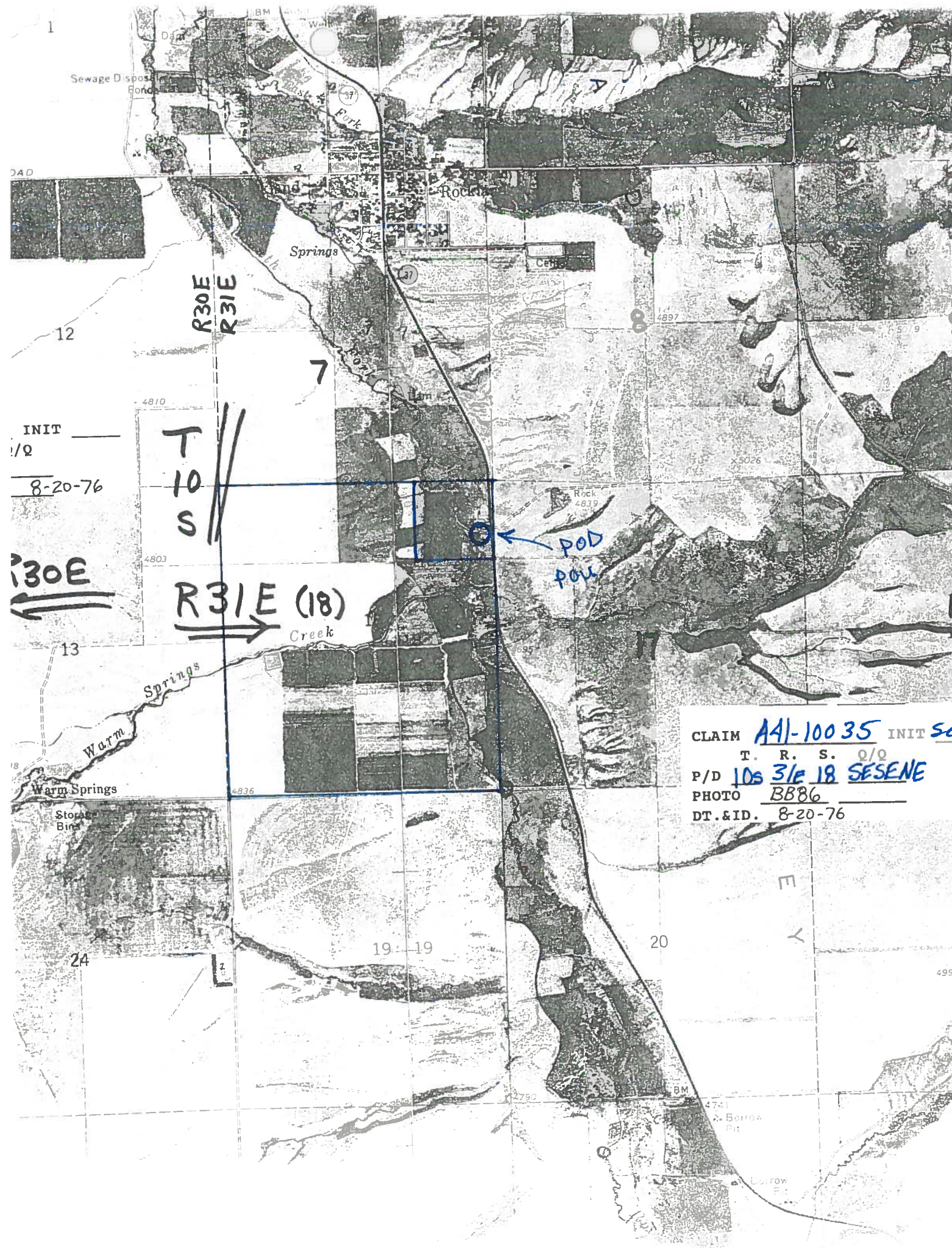
FIELD EXAMINER: Steve Chelland

Signature Steve Chelland

REVIEWED BY/DATE: su 9/8/97

DATA ENTRY BY/DATE: _____

VERIFICATION BY/DATE: _____



INIT
/Q
8-20-76

R30E
13

T
10
S

R31E (18)
Creek

POD
POU

CLAIM AAI-10035 INIT Sc
T. R. S. Q/Q
P/D 10s 3/E 18 SESENE
PHOTO BB86
DT.&ID. 8-20-76