

FEB-26-1997
0016

RIGHT NUMBER: 72-10099
NAME AND ADDRESS: RAMONA HALE
PO BOX 753
CHALLIS ID 83226
SOURCE: GROUNDWATER
QUANTITY: 0.04 CFS

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

PRIORITY DATE: 12/31/1969
POINT OF DIVERSION: T13N R18E S02 Within CUSTER County
PURPOSE AND PERIOD OF USE: DOMESTIC 1 HOME
PERIOD OF USE 01-01 12-31
QUANTITY 0.04 CFS

PLACE OF USE: DOMESTIC Within CUSTER County
T13N R18E S02 SWNW

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. RP13N18E023610A

OWNERSHIP CHANGE KNIGHT TO HALE MADE 7-28-95 TF. REC'D 7-24-95

Comments to KKC 2-27-97

12/31

12/31

OWNER
CODE

NAME & ADDRESS

PRIORITY
DATE

WATER USE

USE PERIOD
FROM TO

DIVERSION
RATE

DIVERSION
VOLUME

C
RAMONA HALE
PO BOX 753
CHALLIS ID 83226
(208) 879-5677

12/31/1969 DOMESTIC

01-01 12-31

0.04 CFS

0.04 CFS

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T13N R18E S02 SHNW

CUSTER County

Place of use Legal Description for: DOMESTIC													
NE				NW				SE					
NENE				NNWN				NENW		NWSW		SESE	
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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: A72-10099
Date Received: 11/20/1989
Receipt No: S010510
Received By: 

COPY FOR
YOUR FILES

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

COPY FOR
YOUR FILES

1. Name: RAMONA HALE
Address: PO BOX 753
CHALLIS ID

208-879-5677

83226

2. Date of Priority: DEC 31, 1969

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
13N	18E	2		SW	NW		CUSTER

5. Description of diverting works:
6"X 45' 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		

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 of	Lot	Use	Acres
13N	18E	2	SW	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:
OWNERSHIP CHANGE KNIGHT TO HALE MADE 7-28-95 TF. REC'D 7-24-95.

15. Basis of Claim: BENEFICIAL USE



State of Idaho
DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301-6105 (208) 736-3033
Fax (208) 736-3037

July 28, 1995

PHILIP E. BATT
Governor

KARL J. DREHER
Director

RAMONA HALE
PO BOX 753
CHALLIS ID 83226

RE: SRBA Claim(s) A72-10099

Dear Ms. Hale:

Pursuant to the change in ownership request that has been submitted to the Department, we have changed the record of current ownership to you. Please find the enclosed copies of the computer record of the claim(s) noting the change in claimant. Review these records and if there is an error, or you have any questions, please contact this office.

Sincerely,

Trish Fawcett
Technical Records Specialist

enc.

DEC 03 1995

Water Right Number - R72-10099 Prefix Translation: RESEARCH Old (D) Number -
+ - - - - Last Name - - - - + + - First Name - - + + - - - - - Address - - - - - +

*** C - CURRENT OWNER ***
HALE
RAMONA
1 - PO BOX 753
2 -
3 -
City- CHALLIS State- ID Zip- 83226
Phone - 208-879-5677

*** O - ORIGINAL OWNER ***
KNIGHT
LEONARD D
1 - PO BOX 739
2 -
3 -
City- CHALLIS State- ID Zip- 83226
Phone - 208-879-4227

KNIGHT
SYLVIA B
1 - PO BOX 739
2 -
3 -
City- CHALLIS State- ID Zip- 83226
Phone - 208-879-4227

+ - - Priority Date - - + + - - - Region - - - + + - - - Stage - - - + + - - - Status - - - +
12/31/1969 17 SOUTHERN J - BENEFICIAL USE

+ - - - - Source - - - - - +
GROUNDWATER
+ - - - - - Tributary - - - - - +

+ - - - - - Point of Diversion - - - - - +
Twn Rng Sec Tract Lot RFlg County

13N 18E 2 SW NW (37) CUSTER
+ - - - - - Water Use - - - - - +
Code Description Period From Period To Diversion Rate Diversion Volume

43 - DOMESTIC
+ - - - - - 01/01 12/31 0.040
+ - - Total Div. Rate - + + - - Total Div. Volume - + + - - Total Consumptive Use - + + - - KW Usage - +
0.040 0.0

+ - - - - - Place of Use - - - - - +
Twn Rng Sec Tract Lot Acres Code Description County

13N 18E 2 SW NW 43 DOMESTIC (37) CUSTER
Total Acres:

+ - - Diversion Means - 6"X 45' WELL, PUMP
+ - - Non-Irrigation Use - DOMESTIC, 1 HOME
+ - - Other Rights for Same Use - NONE

DEC 03 1996



NEW PROPERTY OWNER NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type
(see instructions on back of page)

RECEIVED

JUL 24 1995

Date of Water Transfer

DATE OF CLOSING: 6-30-95

LEGAL DESCRIPTION OF PROPERTY: Township 13 North Range 18 East
Section 2, SW 1/4 of NW 1/4 of _____ 1/4, Govt. Lot _____, BM. _____
Lot _____, Block _____, Subdivision/Townsite _____
If you have additional legal descriptions, please attach separate sheet.

RECEIVED
JUL 26 1995
Department of Water Resources
Southern Region

[] Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis) no

[] Water Right Number(s)
Assigned by IDWR: UNKNOWN

A+R72-10099

[] Name and Address of Former
Owner/Claimant(s)(Seller):

LEONARD D. KNIGHTP.O. BOX 418JEFFREY CITY WYOMING 82310

[] New Owner/Claimant
(Purchaser):

RAMONA HALE

[] New Mailing Address:

P.O. BOX 753CHAFFIS ID 83226

[] New Telephone Number:

(208) 879-5677

[] Does the change in ownership result in a splitting of the water right owned/claimed? yes no
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:

[] Attach proof of
ownership, describe
proof attached:

LEGAL DESCRIPTION + Title Transfer

(proof of ownership must describe either the property conveyed or include the claim number. Proof of ownership is not required if this form is signed by the former owner/claimant.)

[] Signature of New
Owner/Claimant(s):

Ramona L. HaleDate 6-30-95

Date

[] Signature of Former
Owner/Claimant(s):

Leonard D. Knight
Lyle D. KnightDate 6-30-95

Date

(Signature of former claimant(s) is not required if proof of ownership is attached.)

FOR IDWR USE ONLY:

Initial Review and Data-Entry

Date: By:

Further Action Needed:

Further Action Taken

Date: By:

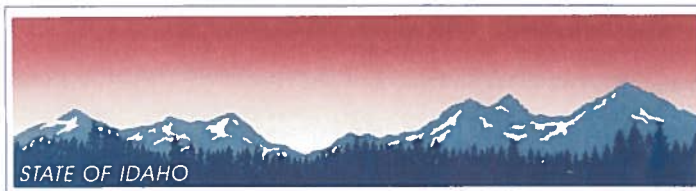
Final Review and Data-Entry

Date: By:

Claim Numbers of Split, if any:

Original to be mailed to Idaho Department of Water Resources
Copies to Former Owner and New Owner

DEC 03 1996



RECEIVED
JUL 24 1995
APPLICANT COPY

TRANSPORTATION DEPARTMENT

P.O BOX 7129 BOISE, ID 83707-1129

VALID FOR 72 HOURS FROM THE DATE RECORDED FOR PASSENGER VEHICLE OR UNLADEN COMMERCIAL VEHICLE REGISTRATION PURPOSES, IF INSURED.

ITD-3339C 10-93 ML
01-807500-2

APPLICATION FOR CERTIFICATE OF TITLE



APPLICANT SIGNATURE	I, the undersigned, certify that the vehicle described below is owned by me, and this vehicle will not be the subject of lien prior to receipt of the title unless indicated below. I further certify that all information contained herein is true and correct to the best of my knowledge and belief. I hereby make application for a Certificate of Title for said motor vehicle. The signature below is my true and legal signature.
	X <u>Ramona L Hale</u>

DUPLICATE APPLICANT SIGNATURE	I hereby make application for duplicate title on the vehicle described below. The original title has been lost unless otherwise indicated: ☐ Illegible ☐ Mutilated. (Please Attach).
	I certify under penalty of law that all statements contained in this application are true and correct. (I.C. 49-518). Furthermore, I hereby authorize the new title to be issued in the names(s) shown in Section 2. The signature below is my true and legal signature.

THIS IS NOT A CERTIFICATE OF TITLE

Recelpt: 6090430

Type of Application										
***** REAL PROPERTY - NOT A TITLE ***** 1995 07 20 19 00 6090430 X										
SECTION 1 VEHICLE DESCRIPTION	Title Number A768465		Vehicle Identification Number BNX570143B320180							
	Previous Receipt		Vehicle Identification Number							
	Year 1976	Make FTWD	Body Type HOUSE TRAILER,				Model TL			
	Description MBL HM		Color Top / Bottom XXX/XXX		Fuel Type					
	Weight 0000000	Length	Width	Hull	Horsepower	Propul.				
	Odometer Reading 0000000		Odometer Status EXEMPT		Odometer Reading Date / /					
	Prev. St.	Previous State Brand		Previous State Title Number						
	Purchaser - Owner Name and Address									
	HALE, RAMONA L									
	PO BOX 753 CHALLIS ID 83226-0000									
SECTION 3 LIENHOLDER(S)	Primary Lienholder NONE									
	Secondary Lienholder									
SECTION 4 AGENCY AND SALES TAX INFORMATION										
Dealer Number		Sales Permit Number 600421		Agency Type COUNTY		Purchase Date 07/20/95				
OTHER		Tax Exemption		GROSS SALES PRICE 0.00		TRADE-IN ALLOWANCE 0.00				
NET SALES PRICE 0.00		TAX PREPAID 0.00		TAX DUE 0.00		TRADE IN				
Year		Make		Body		Model				
Other Tax Information										
STATEMENT OF INTENT										
Agency Name CUSTER COUNTY ASSESSOR										
I certify that I have PHYSICALLY INSPECTED the vehicle described in Section 1, unless the following statement has been checked. I further certify that the VIN and date of this application are correct, and I have witnessed the signature(s) of the person(s) signing this application.										
☐ I DID NOT INSPECT THE VEHICLE.										
Authorized Signature X <u>Ramona L Hale</u>										
Recorded Date 07/20/95		Recorded Time 10:33								
FEES PAID										
TOTAL										

DEC 03 1996

EXHIBIT "A"

RECEIVED
JUL 24 1995
Depo...

A fraction of the SW1/4NW1/4, Section 2, Township 13 North, Range 18 East, Boise Meridian, Custer County, Idaho described as:

Beginning at the Northwest corner of said SW1/4NW1/4; thence
South along the Section line 175 feet to the TRUE POINT OF BEGINNING; thence
North 55°30' East, 259 feet; thence
South 0°0' East 393 feet; thence
South 48°5' West, 285 feet to the West line of said Section 2; thence
North 0°0' South, 428 feet to the Point of Beginning.

EXCEPTING THEREFROM County Road right-of-way.

~~2 1/2 AC BESIDE PROP. MAX ANDER~~

DEC 03 1996

P.O. Box 755
Challis ID 83226

RR5

POST OFFICE



RECEIVED

JUL 26 1995

State Dept. of Water
Resources Div
Phone ID 83730-900
Department of Water Resources
Southern Region

Attn: Administration Bureau

DEC 03 1995
DEC 03 1995

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: A72-10099
Date Received: 11/20/1989
Receipt No: S010510
Received By: _____

DATA ENTERED BY SCL
DATE 11-20-89

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: LEONARD D. KNIGHT 208-879-4227
Address: P.O. BOX 739
CHALLIS, ID 83226

OR

Name: SYLVIA B. KNIGHT 208-879-4227
Address: P.O. BOX 739
CHALLIS, ID 83226

2. Date of Priority: DEC 31, 1969

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
13N	18E	2	SW	NW			CUSTER

5. Description of diverting works:
6"X 45' 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		

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
13N	18E	2	SW 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 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. A72-10099

Date Received _____

Receipt Number 5010510 *su*NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

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

NOV 20 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) LEONARD D. KNIGHT ^{OB} SYLVIA B. KNIGHT Phone (208) 879-4227Mailing Address P.O. BOX 739 CHALLIS IDAHO Zip 832262. Date of Priority (Only one per claim) DECEMBER 31 1969 Month/Day/Year3. Source of water supply (Check one) (☒ Groundwater or Other () (a) WELL

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 13 N Range 18 EASTSection 2, SW 1/4 of NW 1/4 of ~~SW~~ 1/4, Govt. Lot _____, BM.,County of CUSTER

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 WITH PUMP TO HOUSE 6 INCH CASING 45 FEETDEEP

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 minimus9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 1 HOUSEHOLD

MICROFILMED

MAR 19 1993

10. Place of use is: Township: 13 IV Range 18 EAST
Section 2, SW 1/4 of NW 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? CLUSTER

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.
(✓) 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) Leonard D. Knight Date Nov 14, 1989
_____ 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 ID)
County of Cluster) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 14 day of Nov 1989

SEAL

Notary Public John Dal. Carlson
Residing at Bain Td
My Commission Expires 4/2/94

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED

MAR 19 1993

Howard Knight
Box 139
Challin, Idaho
83226

MICROFILMED
MAR 19 1993



Idaho Department of Water Resources
2148 4th ave E ast
Lewin Falls, Idaho.
83381



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

.Nov. 22, 1989

Re: A72-10099

.LEONARD D KNIGHT
.P O BOX 739
.CHALLIS ID 83226

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 19 1993

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIMS PROOF READING REPORT

AJ5808NP
(00-26)

WATER RIGHT NUMBER - A72-10099
PREFIX TRANSLATION: ADJUDICATION CLAIM
OLD (C) NUMBER -

+ - - - - LAST NAME - - - - +
+ - FIRST NAME - - - - +
+ - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
KNIGHT

LEONARD D.

1 - P.O. BOX 739

2 -

3 -

CITY- CHALLIS

PHONE - 208-879-4227

1 - P.O. BOX 739

2 -

3 -

CITY- CHALLIS

PHONE - 208-879-4227

SYLVIA B.

STATE- ID ZIP- 83226

STATE- ID ZIP- 83226

+ - - PRIORITY DATE - - +
12/31/1969
+ - - - - REGION - - - +
17 SOUTHERN

+ - - - - SOURCE - - - - +
GROUNDWATER

+ - - - - STAGE - - - +
J - BENEFICIAL USE

+ - - - - STATUS - - - - +

+ - - - - TRIBUTARY - - - - +

+ - - - - POINT OF DIVERSION - - - - +
TWN RNG SEC TRACT LOT RFLG COUNTY
STREAM INDEX (BLANK IF NO INDEX CODE)

(37) CUSTER

+ - - - - DESCRIPTION - - - - - WATER USE - - - - -
PERIOD FROM PERIOD TO DIVERSION RATE DIVERSION VOLUME

43 - DOMESTIC

01/01

12/31

0.040

+ - - TOTAL DIV. RATE - +
0.040
+ - - TOTAL DIV. VOLUME - +
+ - - TOTAL DIV. CAPACITY - +
+ - - TOTAL CONSUMPTIVE USE - +
0.0
+ - - KW USAGE - +

+ - - - - PLACE OF USE - - - - -
TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION COUNTY

13N 18E 2 SW NW 43 DOMESTIC

(37) CUSTER

+ - - DIVERSION MEANS - 6"X 45' WELL, PUMP

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

+ - - OTHER RIGHTS FOR SAME USE - NONE

+ - - - - REMARKS - - - - -
NO REMARKS FOUND.

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

+ - - - - CONDITIONS OF APPROVAL - - - - -
NO CONDITIONS OF APPROVAL FOUND.

NOV 2 1992
MICROFILMED

