

FEB-03-1997
0017

1

RIGHT NUMBER: 72-10300

NAME AND ADDRESS:

JIM THOMAS
HEIDI THOMAS
HC 63
PO BOX 778
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:

07/20/1977

POINT OF DIVERSION:

T14N R19E S36

SENE Within CUSTER County

PURPOSE AND PERIOD OF USE:

PURPOSE OF USE
STOCKWATER
DOMESTIC 1 HOME

PERIOD OF USE
01-01 12-31
01-01 12-31

QUANTITY
0.02 CFS
0.04 CFS

PLACE OF USE:

STOCKWATER
T14N R19E S36

Within CUSTER County
SENE

DOMESTIC
T14N R19E S36

Within CUSTER County
SENE

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. RP14N19E361822A
STOCKWATER, 6 HORSES

DATE: 01/17/97
PAGE: 21

Sw 1/30/97

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: A72-10300
Date Received: 12/12/1989
Receipt No: S010657
Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: JIM THOMAS 208-879-2462
Address: HC 63, P.O. BOX 778
CHALLIS, ID 83226

OR
Name: HEIDI THOMAS 208-879-2462
Address: HC 63, P.O. BOX 778
CHALLIS, ID 83226

2. Date of Priority: JUL 20, 1977

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
14N	19E	36	SE	NE			CUSTER

5. Description of diverting works:
6" X 300' WELL, 1.5 HP 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	0.020		

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, S/6 HORSES

A72-10300

Page 1

Date: 12/12/89

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
14N	19E	36	SE	NE		DOMEST	
			SE	NE		STOCK	

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:
CHALLIS IRRIG. DIST. IRRIG. 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
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

CIVIL CASE NUMBER: 39576

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEMIdentification No. A72-10300
Date Received 12-8-89
Receipt Number SD10657NOTICE OF CLAIM RECEIVED
TO A
WATER RIGHT

DEC 8 1989

Department of Water Resources
Southern Region OfficeACQUIRED 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) Jim Thomas or Heidi Thomas Phone (208) 879-2462
Mailing Address P.O. Box 778 Challis ID. Zip 832262. Date of Priority (Only one per claim) 7/20/77 Month/Day/Year3. Source of water supply (Check one) (☒) Groundwater or Other () (a) _____
which is tributary to (b) _____ Name or kind of source4. Location of point of diversion is: Township 14 North Range 19 East
Section 36, _____ 1/4 of SE 1/4 of NE 1/4, Govt. Lot _____, BM.,
County of uster

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. 6 IN well 300' 1 1/2 hp pump

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

For Domestic purposes from Jan 1 to Dec 31 amount .04 (cfs)
For stock purposes from Jan 1 to Dec 31 amount .02 (Both dates are inclusive)7. Total quantity claimed .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) D1, 56 Horses

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10. Place of use is: Township: 14 North Range 19 East
Section 36, SE 1/4 of NE 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 ☒ 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 Irrigation water

14. Remarks: Challis Irrigation

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) Jim Thomas Date 12/6/89

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 _____)

County of Custer) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 6th day of December 19 89

SEAL

Notary Public Robert V. Horstall

Residing at Twin Falls, Idaho

My Commission Expires 1-16-1995

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MAR 19 1993



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

Dec. 13, 1989

Re: A72-10300

JIM THOMAS
HC 63 P O BOX 778
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:

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MAR 19 1993

WATER RIGHT NUMBER - A72-10300 PREFIX TRANSLATION: ADJUDICATION CLAIM OLD (D) NUMBER -

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

*** C - CURRENT OWNER ***
THOMAS

JIM

1 - HC 63, P.O. BOX 778
2 -
3 -

STATE- ID ZIP- 83226

CITY- CHALLIS
PHONE - 208-879-2462
1 - HC 63, P.O. BOX 778
2 -
3 -

HEIDI

THOMAS

STATE- ID ZIP- 83226

CITY- CHALLIS
PHONE - 208-879-2462

+ - - - - PRIORITY DATE - - + + - - - REGION - - - + + - - - STAGE - - - + + - - - STATUS - - - - +
07/20/1977 17 SOUTHERN J - BENEFICIAL USE

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

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

14N 19E 36 SE NE (37) CUSTER

+ - - - - CODE DESCRIPTION PERIOD FROM PERIOD TO WATER USE - - - - - DIVERSION RATE DIVERSION VOLUME +
43 - DOMESTIC 01/01 12/31 0.040
04 - STOCKWATER 01/01 12/31 0.020

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

+ - - - - TWN RNG SEC TRACT LOT ACRES PLACE OF USE - - - - - DESCRIPTION COUNTY - - - - - +
14N 19E 36 SE NE 04 STOCKWATER (37) CUSTER
14N 19E 36 SE NE 43 DOMESTIC (37) CUSTER

+ - - - - DIVERSION MEANS - 6" X 300' WELL, 1.5 HP PUMP.

+ - - - - NON-IRRIGATION USE - D/1 HOUSE, S/5 HORSES

+ - - - - OTHER RIGHTS FOR SAME USE - CHALLIS IRRIG. DIST. IRRIG. WATER.

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

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

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01 1994

PREFIX TRANSLATION: ADJUDICATION CLAIM

| | | | | | | | | |
|-----------------------|---|------------|-----------------------|---|------------|-------------------------|---|-------|
| COURT REPORT FILING | - | 00/00/0000 | FIELD INSPECTION MADE | - | 00/00/0000 | CIVIL CASE NUMBER | - | 39575 |
| 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 | - | 12/11/1989 | 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 | - | S010657 | FEDERAL/STATE INDICATOR | - | S |
| CLAIMS TAPE ERROR FLG | - | | PDU OWNERSHIP FLAG | - | Y | PRESUMPTION FLAG | - | |
| FEE EXEMPT FLAG | - | | NAME CONNECTOR | - | QR | NOTICE OF ERROR FLAG | - | |

226400

☐ Verified By:
☐ Topo Map/Ortho-PQ
☐ ASCS Map
☐ Watermaster Records
☐ NAPP Photos
☐ Field Exam
☒ Other (See Remarks)
☐ County Records
☐ Witness Statement
☐ Project Records
☐ iDWR Records

VERIFIED
AUG 08 1992

CERTIFIED
AUG 26 1992
WATER EXAMINER