

FEB-14-1997
0031

RIGHT NUMBER: 72-10355
NAME AND ADDRESS: GERALDINE R HANSEN
R KIRK HANSEN
BOX 111
CLAYTON ID 83227
SOURCE: GROUNDWATER
QUANTITY: 0.045 CFS

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

PRIORITY DATE: 06/30/1989
POINT OF DIVERSION: T11N R18E S35 SWSNW Within CUSTER County
PURPOSE AND PERIOD OF USE: PURPOSE OF USE PERIOD OF USE QUANTITY
DOMESTIC 1 HOME 01-01 12-31 0.045 CFS
PLACE OF USE: DOMESTIC T11N R18E S35 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. RP11N18E354220A

15736

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 01/17/97
PAGE: 45

DIVERSION
VOLUME

BOX 111

Stage: BENEFICIAL USE

CUSTER County

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SE
: NESE NWSE SWSE SESE :
: Lt AC Lt AC Lt AC :
: : : : :
:
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of Approval:

N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
- DETERMINATION OF HISTORICAL BENEFICIAL USE.

N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000

Objection Filed Date:

Objection Filed Date:

4/97 DS1-PROD

✓ 2/13/91

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: A72-10355
Date Received: 1/02/1990
Receipt No: S010807
Received By: th

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: R. KIRK HANSEN 208-838-2383
Address: BOX 111
CLAYTON, ID 83227

AND/OR

Name: GERALDINE R. HANSEN 208-838-2383
Address: BOX 111
CLAYTON, ID 83227

2. Date of Priority: JUN 30, 1989

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11N	18E	35	SW	SE	NW		CUSTER

5. Description of diverting works:
280' WELL, 1.5HP PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.045		

7. Total Quantity Appropriated is:
0.045 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
11N	18E	35	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 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. _____

Date Received _____

Receipt Number _____

RECEIVED NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JAN 2 1990

DEC 20 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.Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) L. Kirk or Geraldine L. Hansen Phone (208) 838-2383Mailing Address Box 111, CLAYTON, ID Zip 832272. Date of Priority (Only one per claim) June, 1989 Month/Day/Year3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source4. Location of point of diversion is: Township 11 N Range 18 E
Section 35, SW 1/4 of SE 1/4 of NW 1/4, Govt. Lot _____, BM.,
County of CLUSTER

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. 1 1/2 hp pump, well is 280' deep

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

For domestic purposes from 11 Month/Day to 12/31 Month/Day amount 0.045 (cfs)(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____7. Total quantity claimed 0.045 (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

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MAR 19 1993

10. Place of use is: Township: 11 N Range 18 E
Section 35, SE 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? Custer

12. Do you own the property listed above as place of use? Yes X 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: We want to file our claim

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) Geraldine L. Hansen Date 11/8/89

Date _____

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 Custer) ss.

Subscribed and sworn (or affirmed) before me this 8th day of December 1989

SEAL

Notary Public [Signature]

Residing at _____

My Commission Expires December 7, 1994

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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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

Jan. 2, 1990

Re: A72-10355

R KIRK HANSEN
BOX 111
CLAYTON ID 83227

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 dark ink, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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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

DEC 26 1989

R. KEITH HIGGINSON
Director

R. Kirk or Geraldine R Hansen
Box 111
Clayton Id 83227
RE: SRBA Claim

A 72-10355

Dear Claimant:

Please find enclosed your claim and your check # 2553 for \$ 25 which you submitted to our office. I am returning these pursuant to Rule 10,4 of the Department's Adjudications Rules and Regulations.

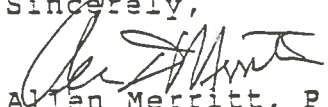
~~The DEADLINE for filing timely claims in MINIDOKA COUNTY was OCTOBER 12, 1989. Since your claim was postmarked _____ your claim is considered late and subject to the additional late fee listed below.~~

Additionally, in checking your claim it appears that the following items need clarification:

- [/] Item #2 Priority *~ date well was drilled*
- [] Item #4 Point of Diversion Legal Description
- [] Item #6 Uses descriptions
- [] Item #9 Description of Non-irrigation Uses
- [] Item #10 Place of Use Legal Description
- [] Item #16 Signature & Notorization
- [] Improper fee (THE CORRECT FEE IS \$ _____)
- [] Other or Remarks

If you will make the necessary corrections and return your claim with the correct fee our office will process your claim. If you have any questions please feel free to contact our office.

Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

Enclosures:

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MAR 19 1993

WATER RIGHT NUMBER - A72-10355

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

[illegible]

*** C - CURRENT OWNER ***
HANSEN

GERALDINE R.

1 - 80X 111

2

3

CITY- CLAYTON
PHONE - 208-838-2383

1 - BOX 111

2

3

CITY- CLAYTON
PHONE - 208-838-2383

STATE- ID ZIP- 83227

R. KIRK

STATE- ID ZIP- 83227

+ -	- PRIORITY DATE - +	+ - - REGION - - +	+ - - STAGE - - +	+ - - STATUS - - +
	06/30/1989	17 SOUTHERN	J - BENEFICIAL USE	

[illegible]

TWN	RNG	SEC	TRACT	LOT	RFLG	COUNTY	POINT OF DIVERSION	STREAM INDEX	(BLANK IF NO INDEX CODE)
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11N	18E	35	SW SE NW	(37)	CUSTER
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[illegible]

43 - DOMESTIC

01/01

12/31

0.345

[illegible][illegible]

11N 18E 35 SEE NW 43 DOMESTIC

(37) CLUSTER

+ - - DIVERSION MEANS - 280' WELL. 1.5HP PUMP

+ - - NON-IRRIGATION USE - D/1 HOUSE

+ - - OTHER RIGHTS FOR SAME USE - 1 -

[illegible]

NO OLD WATER RIGHT NUMBERS FOUND.

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

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NOV 01 1994

