

FEB-14-1997
0044

RIGHT NUMBER: 72-10376
NAME AND ADDRESS: EARL SKEEN
MARY SKEEN
PO BOX 338
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: 06/01/1972
POINT OF DIVERSION: T14N R19E S34 SENW Within CUSTER County
PURPOSE AND PERIOD OF USE: PURPOSE OF USE 01-01 12-31
DOMESTIC 1 HOME QUANTITY 0.04 CFS
PLACE OF USE: DOMESTIC T14N R19E S34 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. RP14N19E341212A

OWNER
CODE

NAME & ADDRESS

PRIORITY
DATE

WATER USE

USE PERIOD
FROM TO

DIVERSION
RATE

DIVERSION
VOLUME

C EARL SKEEN
C MARY SKEEN
PO BOX 338
CHALLIS ID 83226
(208) 879-2769

06/01/1972 DOMESTIC

01-01 12-31

0.04 CFS

0.04 CFS

TOTAL DIVERSION:

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T14N R19E S34 SENW

CUSTER County

Place of use Legal Description for: DOMESTIC

		NE		NW		SW		SE	
NENE NWNE SENE		: NENW NWNW SENW		: NENE NWSE SENE		: NENE NWSE SENE		: NENE NWSE SENE	
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		: Lt Ac Lt Ac Lt Ac	
---		---		---		---		---	
14N 19E 34 :		:		D :		:		:	

POU County: CUSTER

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions 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

- GALLONS PER DAY.

Remarks: EXP PARCEL NO. RP14N19E341212A

Dates: Exam Made Date: Verified Date: Objection Filed Date:

Misc: Water District Number: Field Inspection Flag: Presumption Flag:

Comments: Date: 01/14/1997 User-ID: DS1-PROD Subject: D&S 1 HOME UPDATE

USE-NOT-IRRIGATION FIELD TEXT REPLACED WITH "1 HOME".

CONDITION CODES N11 AND N13 ADDED IF NOT ALREADY PART OF RECORD.

ANY GEN REMARK CHANGED TO AN EXP REMARK.

Audit: 07/26/93 SMITH 03/30/95 POST-STD 01/14/97 DS1-PROD

✓ 2/13/97

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: A72-10376
Date Received: 1/04/1990
Receipt No: S010840
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: EARL SKEEN 208-879-2769
Address: P.O. BOX 338
CHALLIS, ID 83226
OR
Name: MARY SKEEN 208-879-2769
Address: P.O. BOX 338
CHALLIS, ID 83226

2. Date of Priority: JUN 01, 1972

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
14N	19E	34	SE	NW			CUSTER

5. Description of diverting works:
6"X145' WELL, 1.5HP SUBMERSIBLE PUMP, PIPE

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

A72-10376

Page 1

Date: 02/05/90

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MAR 19 1993

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
14N	19E	34	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 _____



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 16 1990

RECEIVED

FEB 5 - 1990

Department of Water Resources
Southern Region Office

EARL SKEEN
P.O. Box 338
Challis, ID 83226

RE: SRBA Claim

Dear Claimant:

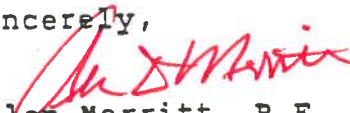
Please find enclosed your claim and your ^{Receipt} check # 5010840 for \$ 50.00 which you submitted to our office. I am returning these pursuant to Rule 10,4 of the Department's Adjudications Rules and Regulations. In checking your claim it appears that the following items need clarification:

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

NEED 1/4-1/4
Legal Description

~~If you wish to continue to press your claim please find enclosed instructions and another claim form to use.~~ If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional \$50.00 late fee.

Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

Sec

Note! Your other claim was OK.
we have data entered it
under A72-10375 and attached
is a copy of the record for
your review.

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MAR 19 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. A72-10376

Date Received _____

Receipt Number 5010840 sec

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) Earl or Mary Skeen Phone (208) 879-2769

Mailing Address P.O. Box 338 - Challis, Id Zip 83226

2. Date of Priority (Only one per claim) June 1, 1972 Month/Day/Year

3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____
Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 14 North Range 19 East

Section 34, SE 1/4 of NW 1/4 of _____ 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, 6" casing, 145' deep, 1 1/2 horsepower
submersible pump, pipe to house

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 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

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

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MAR 19 1993

10. Place of use is: Township: 14 North Range 19 East
Section 34, SE SW 1/4 of NW 1/4, Govt. Lot _____, B.M.,
County of Custer for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any None

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.

None

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 X 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) x Mary Skeen Date 12-29-89

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 x Date _____

Title and Organization _____

State of Idaho/or _____)
County of Custer) SS.

Subscribed and sworn (or affirmed) before me this 29 day of December 19 89

SEAL

Notary Public Maue Kopp

Residing at Challis Idaho

My Commission Expires 11/17/94

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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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

R. KEITH HIGGINSON
Director

.Feb. 9, 1990

Re:A72-10375

A72-10376

.MARY SKEEN
.P O BOX 338
.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 you claim(s), please contact this office.

Yours truly,

A handwritten signature in cursive script, appearing to read 'Judy'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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MAR 19 1993

FEB-14-1997
0045

1

RIGHT NUMBER:

72-10377

NAME AND ADDRESS:

SYVILLA BUXTON
MONA JAMES
PO BOX 171
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:

07/31/1964

POINT OF DIVERSION:

T14N R19E S32

NENE

Within CUSTER County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
DOMESTIC 1 HOME

PERIOD OF USE
01-01 12-31

QUANTITY
0.04 CFS

PLACE OF USE:

DOMESTIC
T14N R19E S32

Within CUSTER County
NENE

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. RP A0001001006A

OWNER
CODE

NAME & ADDRESS

PRIORITY
DATE

WATER USE

USE PERIOD
FROM TO

DIVERSION
RATE

DIVERSION
VOLUME

C SYVILLA BUXTON

07/31/1964

DOMESTIC

01-01 12-31

0.04 CFS

C MONA JAMES

PO BOX 171

CHALLIS ID 83226

(208) 879-4441

TOTAL DIVERSION:

0.04 CFS

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T14N R19E S32

CUSTER County

Place of use Legal Description for: DOMESTIC

		NE		NW		SW		SE		
NENE NWNE SWNE SENE		NENW NUNW SWNW SENW		NESW NWSW SWSW SESW		NESE NWSE SWSE SESE				
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac
---	---	---	---	---	---	---	---	---	---	---
14N	19E	32	:	:	:	:	:	:	:	:
		D								

POU County: CUSTER

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A

N13 - DETERMINATION OF HISTORICAL BENEFICIAL USE.

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

- GALLONS PER DAY.

Remarks: EXP PARCEL NO. RP A0001001006A

Dates: Exam Made Date: Verified Date: Objection Filed Date:

Misc: Water District Number: Field Inspection Flag: Presumption Flag:

Comments: Date: 01/14/1997 User-ID: DS1-PROD Subject: D&S 1 HOME UPDATE

USE-NOT-IRRIGATION FIELD TEXT REPLACED WITH "1 HOME".

CONDITION CODES N11 AND N13 ADDED IF NOT ALREADY PART OF RECORD.

ANY GEN REMARK CHANGED TO AN EXP REMARK.

Audit: 07/26/93 SMITH 03/30/95 POST-STD 01/14/97 DS1-PROD

✓ SW
2/13/97

31-577

N03

T-102-22

Christina
174000
170000
170000
170000

T-18

Bruno

Piya

7201

29-312
31-577
33-675

1/4 1/4

Robt. Savage
167010
1910920
83-93
90
147R

Gay Clifford Geane

3001

17732
17732
17732

582° 35' W 72.26 chains

Bruno
Mara

PIYAA
Mara

1/4 1/4

29-312
31-577

E288.166575

36° 39' W 1879.61584.21

17100

17100

T-81-122

5401

1300

T-74-46

Judy 6-105
36-451

Cyprus
Gardens
Eastern Addition

Ming's Corp.

Center

Viola Stark

72.54 acres

140355

T-81-2

T-7-142

16-8 AC

John T. Hammond

Scott Far

Wild River

EST 407

Div. 2

Viola Stark

36-451

T-81-110

40 AC
158062
176415

19-325
162412
T-82-53

Lawrence
Bradbury

5401

32-20

Cyprus

T-74-142

T-7-142

T-7-142

T-7-142

T-7-142

T-7-142

T-7-142

T-7-142

T-7-142

WATER RIGHT NUMBER - A72-10376 PREFIX TRANSLATION: ADJUDICATION CLAIM OLD (D) NUMBER -
+ - - - - - LAST NAME - - - - + + - FIRST NAME - - - + + - - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***
SKEEN

EARL

1 - P.O. BOX 338
2 -
3 -

CITY- CHALLIS
PHONE - 208-879-2769
1 - P.O. BOX 338
2 -

STATE- ID ZIP- 83226

SKEEN

MARY

CITY- CHALLIS
PHONE - 208-879-2769

STATE- ID ZIP- 83226

+ - - - - - PRIORITY DATE - - - + + - - - - - REGION - - - + + - - - - - STAGE - - - + + - - - - - STATUS - - - - +
06/01/1972 17 SOUTHERN J - BENEFICIAL USE

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

GROUNDWATER

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

14N 19E 34 SE NW (37) CUSTER

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

43 - DOMESTIC

01/01

12/31

0.040

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

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

14N 19E 34 SE NW 43 DOMESTIC

(37) CUSTER

+ - - - - - DIVERSION MEANS - 6"X145' WELL, 1.5HP SUBMERSIBLE PUMP, PIPE

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

+ - - - - - OTHER RIGHTS FOR SAME USE - NONE

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

+ - - - - - OLD WATER RIGHT NUMBERS - - - - - OLD WATER RIGHT NUMBERS FOUND.

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

MICROFILMED

NOV 01 1994

WATER EXAMINER