

FEB-27-1997
0007

VERIFIED BY

2/28/97

1

RIGHT NUMBER:

72-10402

NAME AND ADDRESS:

DWIGHT H SIMMONS
LUCINDA L SIMMONS
PO BOX 727
CHALLIS ID 83226

SOURCE:

GROUNDWATER

QUANTITY:

0.06 CFS

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

PRIORITY DATE:

09/20/1980

POINT OF DIVERSION:

T14N R19E S16

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 S16

Within CUSTER County
NWSE

DOMESTIC

T14N R19E S16

Within CUSTER County
NWSE

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. RP000820000118A
STOCKWATER, UNSPECIFIED

OWNER
CODE

NAME & ADDRESS

PRIORITY
DATE

WATER USE

USE PERIOD
FROM TO

DIVERSION
RATE

DIVERSION
VOLUME

C DWIGHT H SIMMONS
C LUCINDA L SIMMONS
PO BOX 727
CHALLIS ID 83226
(208) 879-2538

09/20/1980

STOCKWATER
DOMESTIC

01-01 12-31
01-01 12-31

0.02 CFS
0.04 CFS

TOTAL DIVERSION:
0.06 CFS

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

T14N R19E S16 NWSE

CUSTER County

Place of use Legal Description for: STOCKWATER									
NE					SW				
NENE	NWNE	SWNE	SENE	SENE	NENW	NWNW	SWNW	SENW	SESE
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt
14N	19E	16	:	:	:	:	:	:	:

Place of use Legal Description for: DOMESTIC									
NE					SW				
NENE	NWNE	SWNE	SENE	SENE	NENW	NWNW	SWNW	SENW	SESE
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt
14N	19E	16	:	:	:	:	:	:	:

POU County: CUSTER

Non-Irrigation Uses: DOMESTIC, 1 HOUSE, STOCKWATER, UNSPECIFIED

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: GEN PARCEL NO. RP000820000118A

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

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

Comments: Date: 07/28/1993 User-ID: SMITH Subject: COPIED FROM REMARKS

2/24/97

EXP

EXP

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

AJ5809NP
No. R72-10402

Comments: Date: 07/28/1993 User-ID: SMITH Subject: COPIED FROM REMARKS
WELL LOCATED ON LT 11, 3-S-I SUBDIVISION.

Audit: 07/28/93 SMITH 03/30/95 POST-STD 01/14/97 D&S-DSHA

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: A72-10402
Date Received: 1/09/1990
Receipt No: S010884
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DWIGHT H. SIMMONS 208-879-2538
Address: P.O. BOX 727
CHALLIS, ID 83226

AND

Name: LUCINDA L. SIMMONS 208-879-2538
Address: P.O. BOX 727
CHALLIS, ID 83226

2. Date of Priority: SEP 20, 1980

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	16		NW	SE		CUSTER

5. Description of diverting works:
140'X6" WELL, 2HP SUBMERSIBLE 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:
0.060 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/UNSPECIFIED

A72-10402

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Date: 01/09/90

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10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
14N	19E	16	NW	SE		DOMEST	
			NW	SE		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:
NONE

14. Remarks:
WELL LOCATED ON LT 11, 3-S-I SUBDIVISION.

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 _____NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

JAN 9 1990

ACQUIRED 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) DWIGHT H. AND LUCINDA L. SIMMONS Phone (208) 879 2538
Mailing Address P.O. BOX 727 CHALLIS IDAHO Zip 832262. Date of Priority (Only one per claim) SEPTEMBER 20 1980 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 Fraction 16, _____ 1/4 of 1/4 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of CUSTER SEE ATTACHED LEGAL DESCRIPTION

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 6" CASING, 140' DEEP 2HP SUBMERSIBLE PUMP AND PIPE TO HOUSE.

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

	Month/Day	Month/Day	(cfs)
For <u>DOMESTIC</u> purposes from <u>1-1</u> to <u>12-31</u> amount <u>0.04</u>			
(Both dates are inclusive)			
For <u>STOCK WATER</u> purposes from <u>1-1</u> to <u>12-31</u> amount <u>0.02</u>			

7. Total quantity claimed 0.06 (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) DOMESTIC, 1 HOME, STOCK WATER CATTLEMICROFILMED
MAR 19 1993

10. Place of use is: Township: 14 NORTH Range 19 EAST
Section 16, NW 1/4 of SE 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 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 ☒ 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) Lucinda L. Simmons Date 12/31/89

Date 12-31-89

For Organizations: I do solemnly swear or affirm that I am _____

of _____ Title _____ 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 31 day of DECEMBER 19 89

SEAL

Notary Public Ratay Kindt

Residing at Challis Idaho

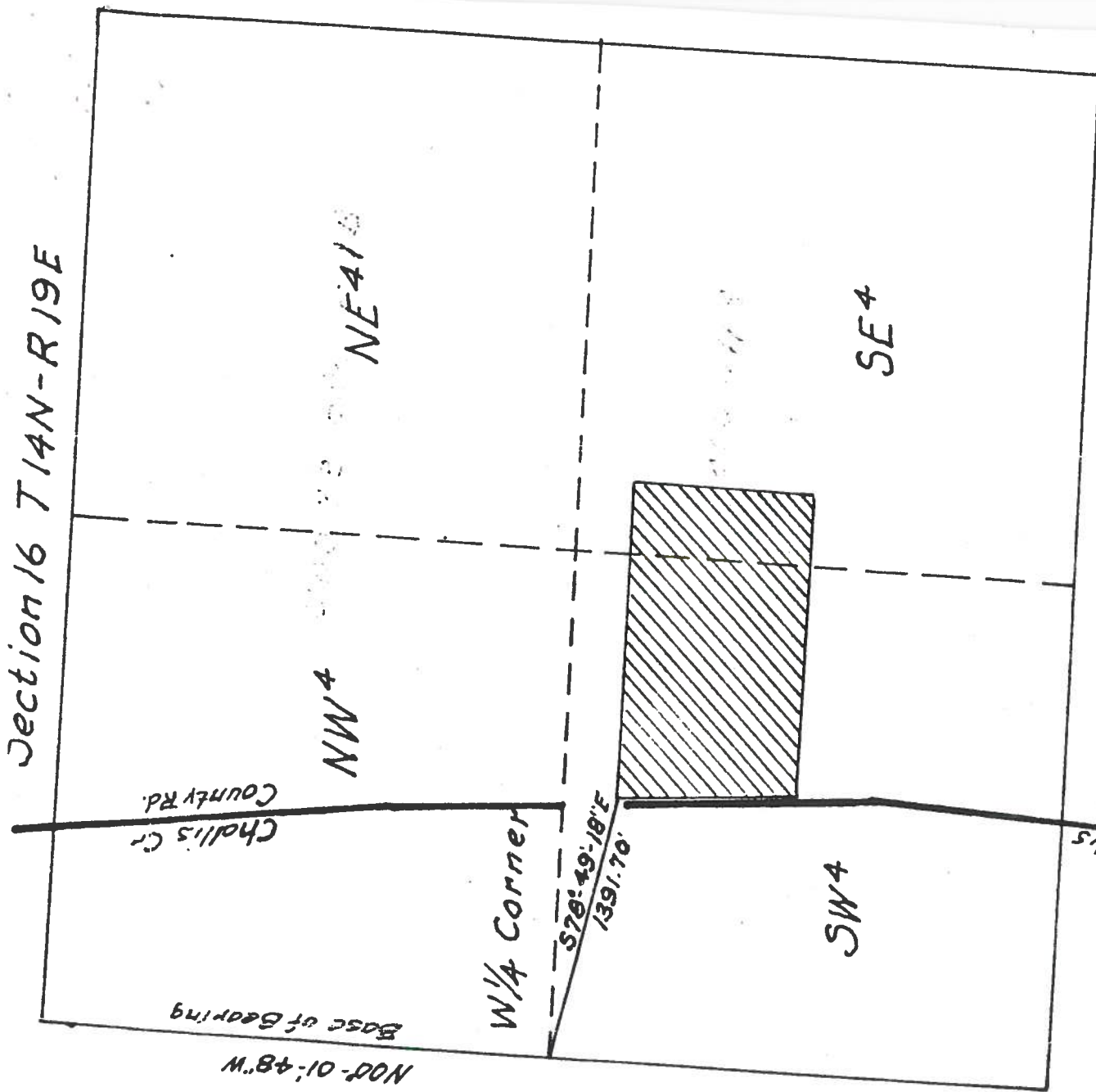
My Commission Expires 3/12/92

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

← C

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MAR 19 1993

Scale 1" = 200'

Steel Pins with 1/2" Alum. Caps



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. 10, 1990

Re: A72-10402

DWIGHT H SIMMONS
P O BOX 727
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

