

MAR-03-1997
0016

1

RIGHT NUMBER: 72-10445

NAME AND ADDRESS: CHARLES L ROOS
MARY E ROOS
PO BOX 629
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: 08/01/1982

POINT OF DIVERSION: T13N R18E S10 NESE 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 T13N R18E S10
Within CUSTER County
NESE

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. RP001080020020A

DATE: 01/17/97
PAGE: 19

DIVERSION
VOLUME

0.04 CFS

CUSTER COUNTY

:	:	NESE	NWSE	SWSE	SESE	:
:	:	Lt	AC	Lt	AC	Lt
:	:	---	---	---	---	---
:	:	D				

Other Rights: NONE

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.

Objection Filed Date:

Field Inspection Flag:

Field Inspection Flag:

Audit:	07/28/93	SMITH	03/30/95	POST-STD	01/14/97	DS1-PROD
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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: A72-10445

Date Received: 1/18/1990 1/12/

Receipt No: S010994

Received By: [Signature] &

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CHARLES L ROOS 208-879-4675
Address: P.O. BOX 629
CHALLIS, ID 83226

OR

Name: MARY E. ROOS 208-879-4675
Address: P.O. BOX 629
CHALLIS, ID 83226

2. Date of Priority: AUG 01, 1982

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	10	NE	SE			CUSTER

5. Description of diverting works:
6" X 90' WELL, 1/2 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		

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

A72-10445

Page 1

Date: 01/18/90

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10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
13N	18E	10	NE SE		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 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. A72-10445
Date Received 1-12-1990
Receipt Number 5010994

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

RECEIVED

JAN 12 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
Eastern District Office

Department of Water Resources

Filing Fee \$25

Southern Region Office
Please type or print clearly

1. Name of Claimant (s) Charles L. Roos or Mary E. Roos Phone (208) 879-4675

Mailing Address P.O. Box 629 Challis, Idaho Zip 83226

2. Date of Priority (Only one per claim) 8-1¹⁹82 Month/Day/Year

3. Source of water supply (Check one) ☒ Groundwater or Other () (a) Well
which is tributary to (b) _____
Name or kind of source

4. Location of point of diversion is: Township 13 N. Range 18 E.
Section 10 , NE 1/4 of SE 1/4 of _____ 1/4, Govt. Lot _____, BM.,
County of CUSTER

Additional points of diversion if any: NONE

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. one well 6" with depth of aprox 90 feet 1/2 or 3/4 hp submersible pump.

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

For Domestic purposes from 1/1 Month/Day to 12/31 Month/Day 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) one household.

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10. Place of use is: Township: 13 N Range 18 E.
Section 10 , NE 1/4 of SE 1/4, Govt. Lot _____, B.M.,

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.
X 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 NONE

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) [Signature] Date 1/10/90
Charles L. Roos 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 _____
Organization 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 _____) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 10th day of January 19 90

SEAL

Notary Public [Signature]

Residing at Blackfoot

My Commission Expires 9/1/94

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

.Jan. 26, 1990

Re: A72-10445

.CHARLES L ROOS
.P O BOX 629
.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

WATER RIGHT NUMBER - A72-10445

PREFIX TRANSLATION: ADJUDICATION CLAIM

OLD (D) NUMBER -

+ - - - - LAST NAME - - - - +

+ - FIRST NAME - - - - +

+ - - - - ADDRESS - - - - - +

*** C - CURRENT OWNER ***

ROOS

CHARLES L

1 - P.O. BOX 629

2 -

3 -

CITY- CHALLIS

PHONE - 208-879-4675

1 - P.O. BOX 629

2 -

3 -

STATE- ID ZIP- 83226

MARY E.

CITY- CHALLIS

PHONE - 208-879-4675

STATE- ID ZIP- 83226

+ - - - PRIORITY DATE - - - +

08/01/1982

+ - - - REGION - - - +

17 SOUTHERN

+ - - - STAGE - - - +

J - BENEFICIAL USE

+ - - - STATUS - - - - +

+ - - - - SOURCE - - - - - +

GROUNDWATER

+ - - - - TRIBUTARY - - - - - +

+ - - - - POINT OF DIVERSION - - - - - +

TWN RNG SEC TRACT LOT RFLG COUNTY

STREAM INDEX (BLANK IF NO INDEX CODE)

13N 18E 10 NE SE

(37) CUSTER

+ - - - - WATER USE - - - - - +

PERIOD FROM PERIOD TO

DIVERSION RATE DIVERSION VOLUME

43 - DOMESTIC

01/01 12/31 0.040

+ - - - - TOTAL DIV. VOLUME - +

+ - - - - TOTAL DIV. CAPACITY - +

+ - - - - TOTAL CONSUMPTIVE USE - +

0.040 0.0

+ - - - - PLACE OF USE - - - - - +

TWN RNG SEC TRACT LOT ACRES CODE DESCRIPTION

COUNTY

13N 18E 10 NE SE

43 DOMESTIC

(37) CUSTER

+ - - - - DIVERSION MEANS - 6" X 90' WELL, 1/2 HP PUMP.

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

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11/01/1994

