

MAR-03-1997
0027

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RIGHT NUMBER:

72-10466

NAME AND ADDRESS:

PETER A SIMON
9888 BARNSDALE DR
~~9888 BARNSDALE DRIVE~~
BOISE ID 83704

SOURCE:

GROUNDWATER

QUANTITY:

0.04 CFS

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

PRIORITY DATE:

07/16/1986

POINT OF DIVERSION:

T11N R16E S25

NENESE

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
T11N R16E S25

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. RP1NN16E257240A

**IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT**

DATE: 01/17/97
PAGE: 37

USE PERIOD FROM TO DIVERSION RATE DIVERSION VOLUME

01-01	12-31	0.04 CFS

Stage: BENEFICIAL USE

CUSTER COUNTY

35

E	SWSE	SESE
C	Lt Ac	Lt Ac
-	-----	-----

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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: A72-10466
Date Received: 12/28/1989
Receipt No: C013720
Received By: lu

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: PETER A. SIMON 208-322-8788
Address: 9888 BARNSDALE DRIVE
BOISE, ID 83704

2. Date of Priority: JUL 16, 1986

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11N	16E	25	NE	NE	SE		CUSTER

5. Description of diverting works:
30' WELL

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

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11N	16E	25	NE	SE		DOMEST	

11. Place of use in counties: CUSTER

A72-10466

Page 1

Date: 02/09/90

MICROFILMED
MAR 19 1993

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 12/28/89Receipt Number 0013720NOTICE 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.

RECEIVED

DEC 28 1989

Filing Fee \$25

Department of Water Resources

Please type or print clearly

1. Name of Claimant (s) Peter A. Simon Phone (208) 322-8788Mailing Address 9888 Bernsdate Dr Boise Zip 837042. Date of Priority (Only one per claim) 7-16-86 Month/Day/Year3. Source of water supply (Check one) () Groundwater or Other () (a) Well

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township Custer 11 N Range R 16 ESection 25, N.E. 1/4 of N.E. 1/4 of S.E. 1/4, Govt. Lot _____, BM.,County of CusterAdditional points of diversion if any: None5. 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. 30 FT deep well

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

For dom purposes from 1-1 to 12-31 amount .04 (cfs)

(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

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) 0/1 house

MICROFILMED

MAR 19 1993

10. Place of use is: Township: 11 N Range R16 E
Section 25, 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 _____

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 _____

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) Peter Simon Date 12-28-99
Peter A. Simon Date _____

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

of _____ Title _____
Organization _____, that I have signed the foregoing
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 ID)
County of Ada) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 20 day of Dec 19 99

SEAL

Notary Public John Dale Carlson

Residing at Boise ID

My Commission Expires 4/2/04

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MAR 19 1993

[illegible]

CERTIFIED
AUG 28 1992
WATER EXAMINER