

RIGHTS FROM: SOURCE: GROUNDWATER
RIGHT NUMBER: 72-11736

NAME & ADDRESS: J R CHALLIS
PATRICIA W CHALLIS
PO BOX 1220
CHALLIS ID 83226-1220

SOURCE: GROUNDWATER
QUANTITY: 0.08 CFS

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

PRIORITY DATE: 06/01/1991
POINT OF DIVERSION: T14N R18E S03 SENW Within CUSTER County

PURPOSE AND PERIOD OF USE: STOCKWATER DOMESTIC 1 HOME & SHOP
PERIOD OF USE: 01-01 12-31
QUANTITY: 0.04 CFS

PLACE OF USE: STOCKWATER T14N R18E S03 Within CUSTER County
DOMESTIC T14N R18E S03 Within CUSTER County

OTHER PROVISIONS 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. RP14N18E031201A
STOCKWATER, 180 MIXED CATTLE & HORSES

✓ DJ 1/22

OWNER
CODE

NAME & ADDRESS

PRIORITY
DATE

WATER USE

USE PERIOD
FROM TO

DIVERSION
RATE

DIVERSION
VOLUME

C J R CHALLIS
C PATRICIA W CHALLIS
PO BOX 1220
CHALLIS ID 832261220
(208) 879-4617

06/01/1991

STOCKWATER
DOMESTIC

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

0.04 CFS
0.04 CFS

0.08 CFS

TOTAL DIVERSION:

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T14N R18E S03 SENW

CUSTER County

Place of use Legal Description for: STOCKWATER									
NE					SW				
NENE		NWNE		SWNW		SESW		SESE	
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt
14N	18E	3	:	:	:	:	:	:	:
S					S				

Place of use Legal Description for: DOMESTIC									
NE					SW				
NENE		NWNE		SWNW		SESW		SESE	
T	R	S	Lt	Ac	Lt	Ac	Lt	Ac	Lt
14N	18E	3	:	:	:	:	:	:	:
D					D				

POU County: CUSTER

Non-Irrigation Uses: DOMESTIC, 1 HOME & SHOP STOCKWATER, 180 MIXED CATTLE & HORSES

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: BEN PARCEL NO. RP14N18E031201A

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

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

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: **A72-11736**
Date Received: 5/11/1992
Receipt No: S014517
Received By: AD

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name: J R CHALLIS 208-879-4617
Address: PO BOX 1220
CHALLIS ID 83226-1220

AND/OR

Name: PATRICIA W CHALLIS 208-879-4617
Address: PO BOX 1220
CHALLIS ID 83226-1220

2. Date of Priority: JUN 1, 1991

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
14N	18E	3	SE	of	NW		CUSTER

5. Description of diverting works:

6" X 380' WELL WITH SUBMERSIBLE PUMP; PIPES TO HOUSE, BARN & SHOP

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	0.040		

7. Total Quantity Appropriated is:

0.080 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:

DOMESTIC/ 1 HOME & SHOP; STOCKWATER/ 180 MIXED CATTLE & HORSES

MICROFILMED

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
14N	18E	3	SE	NW		DOMEST	
			SE	NW		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:

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
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CIVIL CASE NUMBER: 39576

Identification No. A72-11736

Date Received

Receipt Number

5014517-402

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.

RECEIVED

MAY 11 1992

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) J.R. CHALLIS AND/OR PATRICIA W. CHALLIS Phone (208) 879-4617

Mailing Address P.O. Box 1220 CHALLIS, IDAHO Zip 83226-1220

2. Date of Priority (Only one per claim) JUNE 1, 1991 Month/Day/Year

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

which is tributary to (b) _____ Name or kind of source

4. Location of point of diversion is: Township 14N Range 18E

Section 3, 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" DIA. x 380 FT. DEEP; SUBMERSIBLE PUMP;
PIPES TO HOUSE AND BARN/SHOP

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

For DOMESTIC purposes from JANUARY 1 to DECEMBER 31 amount .04 (cfs)

For STOCKWATER purposes from JANUARY 1 to DECEMBER 31 amount .04 (Both dates are inclusive)

7. Total quantity claimed .08 (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 HOME; STOCK VARIES UP TO 180 HEAD CATTLE & HORSES

MICROFILMED
MAR 19 1993

10. Place of use is: Township: 14 N Range 18 E

Section 3, SE 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 _____

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 AT SAME PLACE FOR SAME PURPOSE

14. Remarks: ENCLOSED COPY OF WELL DRILLER'S REPORT BY WOOD RIVER DRILLING & PUMP, INC., P.O. BOX 420, BELLEVUE, ID 83313 COVERING THIS WELL.

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 X do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments 1

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

Signature of Claimant (s) J. K. Challis Date 5/6/92
Patricia W Challis Date 5/6/92

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 _____ Date _____

Title and Organization _____

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

Subscribed and sworn (or affirmed) before me this 6th day of May 19 92

SEAL

Notary Public Sandra A. Hill

Residing at Challis Idaho

My Commission Expires 12/27/95

Last Name _____ Ident No. _____

MICROFILMED
Copies: White-State, Yellow-Claimant
MAR 19 1993

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER

Name J.R. CHALKIS
Address P.O. Box 1220 CHALKIS ID
Drilling Permit No. 72-91-S-003
Water Right Permit No.

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Well diameter increase
☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED

☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other
Thickness Diameter From To
.250 inches 6 inches + 2 feet 70 feet
.250 inches 50d inches 100 feet 380 feet
inches inches feet feet
inches inches feet feet
Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun
Size of perforation 1 1/8" inches by 3" inches SAW
Number From To
80 perforations 360 feet 380 feet
perforations feet feet
perforations feet feet
Well screen installed? ☐ Yes ☒ No
Manufacturer's name
Type Model No.
Diameter Slot size Set from feet to feet
Diameter Slot size Set from feet to feet
Gravel packed? ☐ Yes ☒ No Size of gravel
Placed from feet to feet
Surface seal depth 70 Material used in seal: ☒ Cement grout
☐ Bentonite ☐ Puddling clay NEAT
Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing
☒ Overbore to seal depth
Method of joining casing: ☐ Threaded ☐ Welded ☐ Solvent
Weld
☐ Cemented between strata
Describe access port

6. LOCATION OF WELL

Sketch map location must agree with written location.
N
E
S
County CUSTER
Subdivision Name BOISE
MERIDIAN
Lot No. Block No.
SE 1/4 NW 1/4 Sec. 3 T. 14 S R. 18 E

7. WATER LEVEL

Static water level 0 feet below land surface.
Flowing? ☒ Yes ☐ No G.P.M. flow
Artesian closed-in pressure p.s.i.
Controlled by: ☒ Valve ☐ Cap ☐ Plug
Temperature 52 °F. Quality
Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other
Discharge G.P.M. Pumping Level Hours Pumped
600 7 ft 1

9. LITHOLOGIC LOG

Bore Depth Water
Diam. From To Material Yes No
10 0 2 Topsoil X
10 2 23 Broken shale X
10 23 37 Sand and gravel X
10 37 45 Clay & gravel X
10 45 60 Broken shale X
10 60 67 Clay & gravel X
10 67 70 Shale X
6 70 260 Granite X
6 260 267 Talc & granite
6 267 340 Shale
6 340 352 Talc & shale X
6 352 368 Shale X
6 368 370 Cinder shale X
6 370 375 Granite
6 375 380 Granite X

10.

Work started 5/25/91 finished 6/1/91

11. DRILLERS CERTIFICATION

I/we certify that all minimum well construction standards were complied with at the time the rig was removed.
WOOD RIVER DRILLING
Firm Name Pump, Inc. Firm No. 265
PO Box 420
Address BELLEVUE, IDAHO 83313 Date 6/24/91
Signed by (Firm Official) Ken Smith
and
Operator Bob McLaughlin



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301 (208) 736-3033

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

11-May-1992

RE: ADJUDICATION CLAIM NO. A7²-11736 - CHALLIS

J. R. CHALLIS
PATRICIA W. CHALLIS
PO BOX 1220
CHALLIS ID 83226-1220

DEAR CLAIMANT(S):

PLEASE FIND ENCLOSED YOUR RECEIPTS AND A COPY OF A COMPUTER GENERATED CLAIM(S) BASED ON THE INFORMATION FROM YOUR ORIGINAL CLAIM(S) WHICH HAS BEEN ENTERED IN OUR COMPUTER RECORDS.

PLEASE REVIEW THE COMPUTER GENERATED CLAIM(S) 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 YOUR CLAIM(S), PLEASE CONTACT THIS OFFICE.

SINCERELY,


JEANIE ROBERTSON
RECORDS CLERK

/jr

Enclosures:

MICROFILMED

MAR 19 1993

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Purpose	From	To	C.F.S	(or)	A.F.A.
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Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

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County of CUSTER for (Circle One) Domestic Stock Domestic and Stock

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Signature of Claimant (s) J. K. Chellis Date 5/6/92

Patricia W Chellis Date 5/6/92

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 _____) SS.

Subscribed and sworn (or affirmed) before me this 6th day of May 19 92

SEAL

Notary Public Sandra K Heil

Residing at Challis Idaho

My Commission Expires 12/27/95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant