

AJ0749NP
No. R45-11607

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 01/15/98
PAGE: 1

11607
45400

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	ROBERT MEADE	06/15/1925	STOCKWATER	01-01 12-31	0.02 CFS	
C	LUCILLE MEADE					
	RT 1 BOX 114					
	DECLO ID 83323					
	(208) 654-2840					
				TOTAL DIVERSION:	0.02 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T10S R24E S36 SWSESW

CASSIA County

Place of use Legal Description for: STOCKWATER

				NE				NW				SW				SE				
				NENE NWNE SWNE SENE				NENW NWNW SWNW SENW				NESW NWSW SWSW SESW				NESE NWSE SWSE SESE				
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:
10S	24E	36	:																	:
			:																	:
			:																	:

POU County: CASSIA

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. 10S24E366000
STOCKWATER, 5 STEERS.

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

Comments: Date: 01/15/1998 User-ID: JROBERTS Subject: CHANGED POU
CHANGED POU TO SESW AS CASSIA COUNTY COURTHOUSE RECORDS SHOW THIS
PARCEL IN THE S 1/2 OF THE SW 1/4, WEST OF THE CANAL. jr

Audit: 01/15/98 JROBERTS

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: SEP-9-1997
PAGE: A-1140

RIGHT NUMBER: 45-11607

NAME & ADDRESS: ROBERT MEADE
LUCILLE MEADE
RT 1 BOX 114
DECLO ID 83323

SOURCE: GROUNDWATER

QUANTITY: 0.02 CFS

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

PRIORITY DATE: 06/15/1925

POINT OF DIVERSION: T10S R24E S36 SWSESW Within CASSIA County

PURPOSE AND
PERIOD OF USE: PURPOSE OF USE PERIOD OF USE QUANTITY
STOCKWATER ~~1 HOME~~ 01-01 12-31 0.02 CFS

PLACE OF USE: STOCKWATER Within CASSIA County
T10S R24E S36 ~~SWSE~~ **SESW**

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. 10S24E366000
STOCKWATER, 5 STEERS.

*Cassia Cty. Ct. house shows this
parcel as located in
the S $\frac{1}{2}$ SW $\frac{1}{4}$. (West
of Canal)
1/15/98*

Claim proofread by: 01

Date: 7-29

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: A45-11607

Date Received: 5/31/1989

Receipt No: S008071

Received By: R. V. H.

Entered

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: ROBERT MEADE 208-654-2840
Address: ROUTE 1, BOX 114
DECLO, ID 83323

OR

Name: LUCILLE MEADE 208-654-2840
Address: ROUTE 1, BOX 114
DECLO, ID 83323

2. Date of Priority: JUN 15, 1925

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	24E	36	SW	SE	SW		CASSIA

5. Description of diverting works:
6" X 75' WELL WITH HAND PUMP.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
STOCKWATER	01/01	12/31	0.020		

7. Total Quantity Appropriated is:
0.020 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
S/5 STEERS.

10. Place of Use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
10S	24E	36	SW SE		STOCK	

11. Place of use in counties: CASSIA

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 _____

Spontaneous 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. A45-11607Date Received 6-5-89Receipt Number 9008071

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

JUN 5 1989

Department of Water Resources
Southern Region Office

RECEIVED

MAY 31 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Robert or Lucille Meade Phone (208) 654-7840Mailing Address R#1, Box 114 - Declo, Ida Zip 833232. Date of Priority (Only one per claim) 6-15-1995 Month/Day/Year3. 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 10 Range 24Section 36, 5W 1/4 of SE 1/4 of SW 1/4, Govt. Lot _____, BM.,County of CassiaAdditional 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. Hand Pump - 75 ft deep - 6" casing

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)For Stockwater purposes from 1-1 Month/Day to 12-31 Month/Day amount 0.02 (cfs)
(Both dates are inclusive)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: give and Number of livestock) no Household - Stock - 5 Steers

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MAR 03 1993

10. Place of use is: Township: 10 Range 24

Section 36, 9w 1/4 of SE 1/4, Govt. Lot _____, B.M.,

County of Cassia 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? Cassia

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 No Docket

16. Signature (s)

Number of Attachments 01

By signing I/We acknowledge reading the notice on the back of this claim form. I/We wish to receive for a small annual fee monthly copies of the docket sheet. YES _____ NO X

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

Signature of Claimant (s) Robert Meade Date 5-30-89

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 _____

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 _____ } 75 ft depth 6" casing

County of _____ } SS.

Subscribed and sworn (or affirmed) before me this 30th day of May 19 89

SEAL

Notary Public Archie Land

Residing at Burley, Ida.

My Commission Expires Oct 20, 1991

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 09 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

May 31, 1989

Robert R. &/or E. Lucille Meade
Rt. 1 Box 114
Declo, ID 83323

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim³ and your check # 195
\$ 25⁰⁰ each which you submitted to our office. I am returning 196
these pursuant to Rule 10,4 of the Department's Adjudications Rules and 197
Regulations. In checking your claim it appears that the following
items need clarification:

- [] Item #2 Priority
- [] Item #4 Point of Diversion Legal Description
- [] Item #6 Uses descriptions
- [X] Item #9 Description of Non-irrigation Uses - Please indicate number of households & number & kind of stock
- [] Item #10 Place of Use Legal Description
- [] Item #16 Signature & Notorization
- [] Improper fee (THE CORRECT FEE IS \$ _____)
- [X] Other or Remarks Item 5 (Please describe diversion works. If all you know about it that it is a well & pump just put "well & pump".

You indicated 2 attachments to the claims. We only find the check attached.

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 late fee of \$ 50.00.

Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

MICROFILMED

MAR 09 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

. Aug. 18, 1989

Re: A45-11609

A45-11608

A45-11607

. ROBERT MEADE
. ROUTE 1 BOX 114
. DECLO ID 83323

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,

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 09 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

May 31, 1989

Robert R. &/or E. Lucille Meade
Rt. 1 Box 114
Declo, ID 83323

RE: SRBA Claim

Dear Claimant:

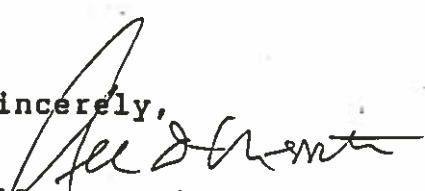
Please find enclosed your claim³ and your check # 195
\$ 25.00 each which you submitted to our office. I am returning 196
these pursuant to Rule 10,4 of the Department's Adjudications Rules and 197 for
Regulations. In checking your claim it appears that the following
items need clarification:

- [] Item #2 Priority
- [] Item #4 Point of Diversion Legal Description
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- [X] Item #9 Description of Non-irrigation Uses - Please indicate number of
households & number & kind
of stock
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Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures:

DEC 03 1996

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - DECREE DATE - +
00/00/0000

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+-----+-----COMMENTS-----+
                                NO COMMENTS FOUND
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COURT REPORT FILING	-	00/00/0000	FIELD INSPECTION MADE	-	00/00/0000	CIVIL CASE NUMBER	-	39576
OBJECTION FILED DATE	-	00/00/0000	FIELD INSPECTION FLAG	-		OLD CASE NUMBER	-	
RESPONSE FILED DATE	-	00/00/0000	VERIFIED DATE	-	00/00/0000	OLD JUDICIAL DISTRICT	-	
CLAIM RECEIVED DATE	-	06/12/1989	LAST AMENDED DATE	-	00/00/0000	TEMPORARY RIGHT	-	P
PROOF DUE DATE	-	00/00/0000	PROOF MADE DATE	-	00/00/0000	WATER DISTRICT	-	
LICENSED DATE	-	00/00/0000	RECEIPT NUMBER	-	S008071	FEDERAL/STATE INDICATOR	-	S
CLAIMS TAPE ERROR FLG	-		POU OWNERSHIP FLAG	-	Y	PRESUMPTION FLAG	-	
FEE EXEMPT FLAG	-		NAME CONNECTOR	-	OR	NOTICE OF ERROR FLAG	-	

ENTERED 12-28-92 WML
CHECKED 2/6/93/A

"Verified By"
 Topo Map/Ortho-PQ
 ASCS Map
 Watermaster Records
 NAPP Photos
 Field Exam
 Other (See Remarks)
 County Records
 Witness Statement
 Project Records
 IDWR Records

VERIFIED
NOV 12 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 13 1991
WATER EXAMINER