

AJ5856NP

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

DATE: SEP-9-1997

PAGE: A-1386

RIGHT NUMBER: 45-11924

NAME & ADDRESS: EMMETTE W ROGERS
VIRGINIA ROGERS
340 N MILLER
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.08 CFS

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

PRIORITY DATE: 10/19/1984

POINT OF DIVERSION: T10S R22E S21 SENE Within CASSIA County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.08 CFS

PLACE OF USE: DOMESTIC Within MINIDOKA County
T10S R22E S21 SENE

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. 10S22E212255

Claim proofread by: CM

Date: 9-29

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: A45-11924
Date Received: 10/24/1989
Receipt No: S010149
Received By: _____

DATA ENTERED BY SCL
DATE 10-24-1989

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: EMMETTE W. ROGERS 208-678-8506
Address: 340 NORTH MILLER
BURLEY, ID 83318

AND
Name: VIRGINIA ROGERS 208-678-8506
Address: 340 NORTH MILLER
BURLEY, ID 83318

2. Date of Priority: OCT 19, 1984

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
10S	22E	21	SE	NE			CASSIA

5. Description of diverting works:
2 SANDPOINT WELLS AND 3 HP PUMPS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.080		

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:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
10S	22E	21	SE	NE		DOMEST	

11. Place of use in counties: MINIDOKA

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE

14. Remarks:

TWO RECEIPTS: S010149 FOR \$25.00 ADJ. FEE.
S010277 FOR \$50.00 LATE FEE.

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. 445-11924
Date Received 10-12-89
Receipt Number 5010149
5010277

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

OCT 24 1989

Department of Water Resources
Southern Region Office

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

RECEIVED

OCT 13 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Emmette W. Rogers & Virginia Rogers Phone (208) 678 8506

Mailing Address 340 North Miller Burley, Idaho Zip 83318

2. Date of Priority (Only one per claim) Oct. 19, 1984 Month/Day/Year

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

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

4. Location of point of diversion is: Township 10S Range 22

Section 21 , SE 1/4 of NE 1/4 of _____ 1/4, Govt. Lot _____, BM.,

County of Cassia

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. 2 44" Sandpoint wells 3HP Motor

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 0.080 (cfs) ea
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.080 (cfs) ea

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) 0/1 Household

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MAR 10 1993

10. Place of use is: Township: 10S Range 22

Section 2 1, SE 1/4 of NE 1/4, Govt. Lot _____, B.M.,

County of Cassia 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? 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.

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) E. Wayne Rogers Date 10/11/89

Virginia Rogers Date 10/11/89

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 _____ } SS.

County of Cassia }

Subscribed and sworn (or affirmed) before me this 12th day of October 19 89

SEAL

Notary Public Mary L. Burdick

Residing at Burley, Idaho

My Commission Expires 6-13-95

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 10 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

OCT 16 1989

R. KEITH HIGGINSON
Director

Emmette W. Rogers & Virginia Rogers
340 North Miller
Burley, Idaho 83318

RE: SRBA Claim

Dear Claimant:

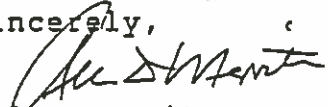
Please find enclosed your claim and your check # 1089 for \$ 25.00 which you submitted to our office. I am returning these pursuant to Rule 10,4 of the Department's Adjudications Rules and Regulations. In checking your claim it appears that the following items need clarification:

- ☐ Item #2 Priority
- ☒ Item #4 Point of Diversion Legal Description
- ☐ Item #6 Uses descriptions
- ☐ Item #9 Description of Non-irrigation Uses
- ☒ Item #10 Place of Use Legal Description
- ☒ Item #16 Signature & Notorization
- ☐ Improper fee (THE CORRECT FEE IS \$)
- ☒ Other or Remarks Complete items #13 and #15.

Note that items #4 & 10 do not match; please check.

~~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 \$50.00 late fee.

Sincerely,


Allen Merritt, P.E.
Water Rights Supervisor

ADM:adm
Enclosures: .

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MAR 10 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

OCT 20 1989

R. KEITH HIGGINSON
Director

RECEIVED

OCT 24 1989

Department of Water Resources
Southern Region Office

Emmette W Rogers
340 North Miller
Burley Id 83318

A45-11924

RE: SRBA Claim

Dear Claimant:

Please find enclosed your claim and your ^{Receipt} ~~check~~ # 5010149 for \$ 25.00 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

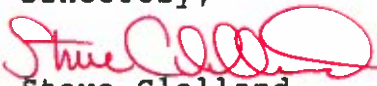
- () Item #2 Priority date (day/month/year)
- () Item #4 Point of Diversion Legal Description
- () Item #6 Uses descriptions
- () Item #9 Description of Non-irrigation uses
- () Item #10 Place of Use Legal Description
- () Item #16 Signature & Notarization
- (☒) Improper fee (THE CORRECT FEE IS \$ 75.00)
- () Other or Remarks

\$50.00
LATE FEE DUE

After June 8, 1989 All claims from Cassia County
ARE ASSESSED A late fee of \$50.00.

Since you have paid the initial \$25 please Remit the
LATE FEE that is Due to continue processing your claim.
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 and additional late fee of \$ 50.00.~~

Sincerely,


Steve Clelland
Water Right's Agent

enc:

MICROFILMED

MAR 10 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

.Oct. 26, 1989

Re: A45-11924

.EMMETTE W ROGERS
.340 NORTH MILLER
.BURLEY ID 83318

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 black ink, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

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MAR 10 1993

WATER RIGHT NUMBER - A45-11324

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - - CONDITIONS OF APPROVAL - - - - - +
NO CONDITIONS OF APPROVAL FOUND.

+ - - - - DECREE PLAINTIFF - - - +	+ - - - - DECREE DEFENDANT - - - +	+ - DECREE DATE - +
		00/00/0000

+ - - AUDIT FIELDS - 10/24/89 CLELLAND

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+-----COMMENTS-----+
NO COMMENTS FOUND

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[illegible]

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	- 10/13/1989	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	- S010149	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	- AND	NOTICE OF ERROR FLAG	-

10522E 21 2255

DATA ENTRY
ENTERED 1-1
CHECKED 2/8

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

VERIFIED
NOV 15 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER