

09/21/2006

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 67-7224

NAME AND ADDRESS: ROBERT J OGDEN
1225 HIGHLAND LN
MESA ID 83643

FRANCINE A OGDEN
1225 HIGHLAND LN
MESA ID 83643

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS
1.200 AFY

PRIORITY DATE: 08/27/1974

POINT OF DIVERSION:

T15N R01W S21 NWSESE Within ADAMS County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

DOMESTIC

01/01 12/31

0.040 CFS

1.20 AFY

The irrigation occurring under this domestic use shall not exceed 1/2 acre.

Domestic use is for 1 home.

PLACE OF USE: DOMESTIC Within ADAMS County

T15N R01W S21 SESE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL: BASIS OF CLAIM - License
Parcel No. RP15N01W219000A

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 67-7224

WATER RIGHT NUMBER: 67-7224

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	LARRY J SHAW BOX 3 MESA, ID 83643
Current Owner	MARY DON SHAW BOX 3 MESA, ID 83643

Priority Date: 08/27/1974

Basis: License

Status: Active

<u>Source</u>	<u>Tributary</u>
GROUND WATER	

<u>Beneficial Use</u>	<u>From</u> <u>To</u>	<u>Diversion Rate</u>	<u>Annual Volume</u>
IRRIGATION	4/01 to 10/31	0.020 CFS	4.00 AF
DOMESTIC	1/01 to 12/31	0.040 CFS	0.60 AF
	<u>Total Diversion:</u>	0.060 CFS	4.60 AF

Location of Point(s) of Diversion

GROUND WATER	SE1/4SE1/4	Sec. 21, Twp 15N, Rge 01W, B.M.
ADAMS County		

Place of Use

IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals	
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE		
15N	01W	21																	1.0	1.0

Total Acres: 1

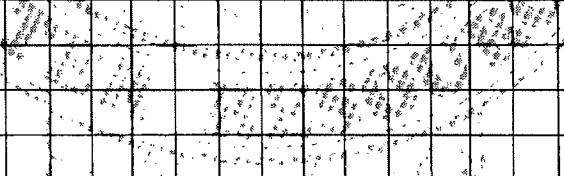
DOMESTIC same as IRRIGATIONConditions of Approval:Remarks:Comments:Dates and Other Information:

WATER RIGHT LICENSE

THIS IS TO CERTIFY, that LARRY J. & MARY DON SHAW

Beneficial Use	Period of Use		Rate of Diversion	Annual Volume
Domestic	from Jan. 1	to Dec. 31	at 0.04 cfs and	0.6 acre feet
Irrigation	from April 1	to Oct. 31	at 0.02 cfs and	4.0 acre feet
	from	to	at	cfs and
(both dates inclusive)				

Description and location of place of use:

Twp.	Range	Sec.	NE¼				NW¼				SW¼				SE¼				Totals	
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼		
15 N	1 W	21																	X	One

Total number of acres irrigated One

NOTE: Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho Law. This right may be forfeited by five years of non-use.

The right to the use of the water hereby confirmed is restricted and appurtenant to the lands or place of use herein described, as provided by the laws of Idaho.

Witness the seal and signature of the Director, affixed at Boise, Idaho, this 2 day of September, 19 75.

Director

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 67-13996

WATER RIGHT NUMBER: 67-13996

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	ROBERT J OGDEN 1225 HIGHLAND LN MESA, ID 83643 (208)256-4368
Current Owner	FRANCINE A OGDEN 1225 HIGHLAND LN MESA, ID 83643 (208)256-4368

Priority Date: 07/01/1977

Basis: Decreed

Status: Active

<u>Source</u>	<u>Tributary</u>
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GROUND WATER

<u>Beneficial Use</u>	<u>From</u> <u>To</u>	<u>Diversion Rate</u>	<u>Annual Volume</u>
DOMESTIC	1/01 to 12/31	0.040 CFS	
<u>Total Diversion:</u>		0.040 CFS	

Location of Point(s) of Diversion

GROUND WATER	NW1/4SE1/4SE1/4	Sec. 21, Twp 15N, Rge 01W, B.M.
ADAMS County		

Place of Use

DOMESTIC

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
15N	01W	21																X	

Conditions of Approval:

1. PARCEL NO. RP15N01W219000 A STOCKWATER, 15 RANGE CATTLE
2. C18 THIS PARTIAL DECREE IS SUBJECT TO SUCH GENERAL PROVISIONS NECESSARY FOR THE DEFINITION OF THE RIGHTS OR FOR THE EFFICIENT ADMINISTRATION OF THE WATER RIGHTS AS MAY BE ULTIMATELY DETERMINED BY THE COURT AT A POINT IN TIME NO LATER THAN THE ENTRY OF A FINAL UNIFIED DECREE. SECTION 42-1412(6), IDAHO CODE.
3. N13 THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.
4. N11 THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.

*Overlapping
right -*

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 67-13996

Remarks:

Comments:

Dates and Other Information:

Licensed Date:
Decreed Date: 12/29/2000
Enlargement Use Priority Date:
Enlargement Statute Priority Date:
State or Federal: S
Owner Name Connector: OR
Water District Number:
Generic Max Rate Per Acre:
Generic Max Volume Per Acre:
Decree Defendant:
Decree Plaintiff:
Civil Case Number: 39576
Judicial District: FIFTH
Swan Falls Trust or Nontrust:
Swan Falls Dismissed:
DLE Act Number:
Carey Act Number:
Mitigation Plan: False

Combined Use Limits:

Water Supply Bank:

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: **A67-07224**
Date Received: 1/ 2/1990
Receipt No: W007308
Received By: _____

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

1. Name: ROBERT J OGDEN 208-256-4368
Address: 1225 HIGHLAND LN
BOX 3
MESA ID 83643

OR

Name: FRANCINE A OGDEN 208-256-4368
Address: 1225 HIGHLAND LN
BOX 3
MESA ID 83643

2. Date of Priority: AUG 27, 1974

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
15N	01W	21	NW	SE	SE		ADAMS

5. Description of diverting works:
165' WELL, 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:
DOMESTIC, 1 HOME W/LAWN

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
15N	01W	21	SE	SE		DOMEST	

11. Place of use in counties: ADAMS

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

13. Other Water Rights Used:

2ND WELL FOR DOMESTIC CLAIMED AT SAME LOCATION.

14. Remarks:

15. Basis of Claim: LICENSE

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. A67-07224Date Received 1-2-90Receipt Number W007308

RECEIVED **NOTICE OF CLAIM**
TO A
WATER RIGHT

JAN 02 1990

Department of Water Resources
Western Regional Office

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

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) OGDEN, ROBERT J. & FRANKINE A. Phone 208) 256-4368
Mailing Address 1225 HIGHLAND LN., Box 3, MESA, ID Zip 83643

2. Date of Priority (Only one per claim) AUG. 27, 1974 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 15 N Range 1 W
Section 21, Nw 1/4 of SE 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of ADAMS

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. DRIILLED WELL, APPROX 165' DEPTH, WITH PUMP & SPIGOT.

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

For DOMESTIC purposes from 01/01 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) DOMESTIC, 1 HOUSEHOLD, LAWN IRRIGATION

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10. Place of use is: Township: 15N Range 81W
Section 21, SE 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? ADAMS

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 or 2nd WELL FOR DOMESTIC CLAIMED AT SAME LOCATION

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 67-07224

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 X 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) X Robert J. Ogden Date 12/6/89

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 _____)
County of ADAMS) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 6th day of DEC. 1989

SEAL

Notary Public Shirley E. Luthy

Residing at BOISE, ID

My Commission Expires 11/08/1994

Last Name OGDEN Ident No. A67-07224

Copies: White-State, Yellow-Claimant

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Water Right Number - 67-07224

Prefix Translation: WATER RIGHT

Old (D) Number -

+ - - - - Last Name - - - - + + - First Name - - + + - - - - - Address - - - - - +

*** C - CURRENT OWNER ***

SHAW

LARRY J.

1 - BOX 3

2 -

3 -

City- MESA

State- ID Zip- 83643

Phone -

SHAW

MARY DON

1 - BOX 3

2 -

3 -

City- MESA

State- ID Zip- 83643

Phone -

+ - - Priority Date - - + + - - - Region - - - + + - - - Stage - - - + + - - - Status - - - +
08/27/1974 14 WESTERN L - LICENSE

+ - - - - Source - - - - - + + - - - - - Tributary - - - - - +
GROUNDWATER

Point of Diversion							Diversion Name	Diversion Rate	Diversion No.
Twn	Rng	Sec	Tract	Lot	RFlg	County			
15N	01W	21	SE SE		(3)	ADAMS			

Code	Description	Period From	Period To	Diversion Rate	Diversion Volume
01 - IRRIGATION		04/01	10/31	0.020	4.00
43 - DOMESTIC		01/01	12/31	0.040	0.60

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Div. Capacity - +
0.060 4.60

Place of Use						Description	County
Twn	Rng	Sec	Tract	Lot	Acres	Code	
15N	01W	21	SE SE		1.0	01	IRRIGATION (3) ADAMS

Total Acres: 1.0

+ - - Diversion Means -

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use -

+ - - - - - Remarks - - - - - +
No Remarks found.

+ - - - - - Old Water Right Numbers - - - - - +
No Old Water Right Numbers found.

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Water right number - 67-07224

Prefix Translation: WATER RIGHT

+ - - - - Conditions of Approval - - - - -
No Conditions of Approval found.

+ - - - - Decree Plaintiff - - - + + - - - - Decree Defendant - - - + + - Decree Date - +
00/00/0000

+ - - - - Comments - - - - -
No Comments Found

+ - - Audit Fields - 06/18/85 05/01/88 CONVERT

+ - - - - Water Rights Dates and Flags Area - - - - -

Proof Due Date - 00/00/0000	Field Exam Made - 00/00/0000	Field Exam Fee -
Approved/Denied - 00/00/0000	Protested Date - 00/00/0000	Swan Falls -
Proof Made Date - 00/00/0000	Hearing Date - 00/00/0000	Temporary Right - P
Exam to S.O. Date - 00/00/0000	Verified Date - 06/18/1985	DLE/Carey Act -
Order Show Cause - 00/00/0000	Receipt Number -	Water District -
Licensed Date - 02/08/1979	Appl Received - 00/00/0000	Transfer/Amended -
Decree Date - 00/00/0000	Name Connector -	POU Ownership Flag -
Presumption Flag -		

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ADJUDICATION CLAIM REVIEW CHECKLIST

12-1-92

CLAIMANT'S NAME Ogden, Robert & FrancineCLAIM IDENT. NO. A67-07224DATE RECEIVED 1-2-90 RECEIPT # W007308 FEE PAID \$ 25.00 FEE REQ'D \$ 25.00

	YES	NO	Requir Info?
1. Is the name and address complete with zip code?	<u>X</u>	___	*
2. Is a priority date entered?	<u>X</u>	___	*
Is the priority date acceptable in view of mandatory filing dates?	<u>X</u>	___	*
See Adjudication Memos #1 and #4 to determine if a Permit is required.			
3. (a) Is a source entered?	<u>X</u>	___	*
(b) Is a tributary to entered? (if required) N/A <u>X</u>	___	___	
4. Is the legal description of the p.d. sufficient?	<u>X</u>	___	*
5. Is there a description of the diverting works?	<u>X</u>	___	
6. Are the water uses appropriate for the form?	<u>X</u>	___	*
The short form is limited to D/S uses. Other uses must be filed on the long form. Note: If stockwater stor. or instream stockwater are filed on the short form & all items complete, do not return claim.			
Is the period of use included?	<u>X</u>	___	
Is a quantity claimed for each use?	<u>X</u>	___	*
7. Is a total quantity claimed entered?	<u>X</u>	___	
8. If required is a consumptive use entered? N/A <u>X</u>	___	___	
Is the consumptive use correct? N/A <u>X</u>	___	___	
9. Are the non-irrigation uses listed showing # of homes, hd. of stock?	<u>X</u>	___	*
If multiple domestic, is single ownership indicated?	<u>X</u>	___	
10. Is (are) the place(s) of use and purpose(s) indicated?	<u>X</u>	___	*
11. Is (are) the county(ies) entered?	<u>X</u>	___	
12. Is the ownership of p.u. checked?	<u>X</u>	___	
13. Are other water rights listed or "none" indicated?	<u>X</u>	___	
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) N/A <u>X</u>	___	___	
15. Is the basis of the claim indicated?	<u>X</u>	___	
16. If the basis of claim is shown as license, permit, or decree is the existing water right no. listed? N/A <u>X</u>	___	___	
If yes, compare claim w/existing right and attach proof report noting any differences in comments.			
If no, was water right no. found?	___	___	*
17. If the basis of claim is shown as beneficial use, or not marked, are there existing water rights shown in our records using the legal description or name on the claim? N/A <u>X</u>	___	___	
(If yes, attach a proof report & complete number change)			
NOTE: If the claim is for dom/stock this check is not as necessary unless it is located within an area where dom/stock rights were decreed.			
18. If the claimant requested a monthly docket sheet, was the fee paid? N/A <u>X</u>	___	___	
19. Is the claim signed by the claimant, and is the signature appropriate?	<u>X</u>	___	*
20. Has the claim been signed, sealed, and dated by a notary?	<u>X</u>	___	*
21. Was this claim filed on time?	<u>X</u>	___	*
(Check ML3 for date mailed-not all were mailed on the planned date)			
If no, was an extension of time filed & approved?	___	___	*
22. Is the fee enclosed correct? Exempt <u>X</u>	___	___	*

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YES NO

23. Is this claim being rejected and returned to claimant?

— —

24. Can this claim be data entered?

X —

25. Was claim modified?

— X

If yes, do modifications require notification to claimant? . . .

— —

Note: Modifications made must be explained in comments stating where the information for any changes was found.

Claim reviewed by: JH

Date 11-1-94

Claim data entered by: JH

Date 12-7-94

IF REQUIRED INFORMATION IS INCOMPLETE SEE INSTRUCTIONS TO DECIDE WHETHER THE CLAIM NEEDS TO BE RETURNED OR IF IT CAN BE MODIFIED. IF IT MUST BE RETURNED INSTRUCTIONS WILL SPECIFY WHICH FORM LETTER TO USE.

Comments: no irrigation claimed as original license.

RECEIVED
JAN 12 1995