

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

DATE: OCT-30-1996

PAGE: A-75

RIGHTS FROM: SOURCE: GROUNDWATER

RIGHT NUMBER: 36-11844

NAME AND ADDRESS: WILLIAM G HAYES
RT 5 BOX 60
RUPERT ID 83350

SOURCE: GROUNDWATER

QUANTITY: 0.06 CFS

THE QUANTITY FOR NON-IRRIGATION USE IS LIMITED TO THE AMOUNT BENEFICIALLY
USED FOR DOMESTIC, 1 HOME

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

PRIORITY DATE: 09/30/1979

POINT OF DIVERSION: T09S R24E S08

SWNNW

Within MINIDOKA County

PURPOSE AND

PERIOD OF USE:

PURPOSE OF USE
DOMESTIC 1 HOME ✓PERIOD OF USE
01-01 12-31 ✓QUANTITY
0.06 CFS

PLACE OF USE:

DOMESTIC
T09S R24E S08Within MINIDOKA County
SWNW

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.
PARCEL NO. RP 09S24E0833201

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
PARCEL NO. RP 09S24E083320. ✓

as claimed & rec
to obj RB 3/5/98

check out
legals discrepancy -
KW
10-31-94
~~KW~~

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: A36-11844
Date Received: 9/05/1989
Receipt No: S009062
Received By: R. J. J.

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: WILLIAM G. HAYES 208-436-5603
Address: RT. 5, BOX 60
RUPERT, ID 83350

2. Date of Priority: SEP 30, 1979

3. Source: GROUNDWATER. Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
09S	24E	8	SW	NW	NW		MINIDOKA

5. Description of diverting works:
6" X 180' WELL WITH PUMP.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.060		

7. Total Quantity Appropriated is:
0.060 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 of	Lot	Use	Acres
09S	24E	8	SW	NW		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:

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. A36-11844
Date Received 9-5-89
Receipt Number 5009062

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

SEP 5 1989

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day. Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) William G Hayes Phone (208) 436-5603
Mailing Address Rt 5 Box 60 Rupert Zip 83350

2. Date of Priority (Only one per claim) 9/79 (September 1979) 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 9 South Range 24 East
Section 8 SW 1/4 of NW 1/4 of NW 1/4, Govt. Lot _____, BM.,
County of Mundaka

Additional points of diversion if any: none

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" casing, 180' deep, submersible pump, pipe to house.

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 0.06 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed 0.06 (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 - one household - 1/2 acre lawn.

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FEB 12 1992

10. Place of use is: Township: 9 South Range 24 East

Section 8, SW 1/4 of NW 1/4, Govt. Lot _____, B.M.,

County of Minidoka 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? Minidoka

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 (X)

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)

Number of Attachments _____

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 X NO _____

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

Signature of Claimant (s) William Hays Date 8-16-89

Kathleen Hays Date 8-16-89

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 _____)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this 16th day of August 19 89

SEAL

Notary Public Margery Sneddon

Residing at Minidoka County

My Commission Expires 10-30-92

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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FEB 12 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

Sept. 6, 1989

Re: A36-11844

WILLIAM G HAYES
RT 5 BOX 60
RUPERT ID 83350

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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FEB 12 1993

VERIFIED
DEC - 1990