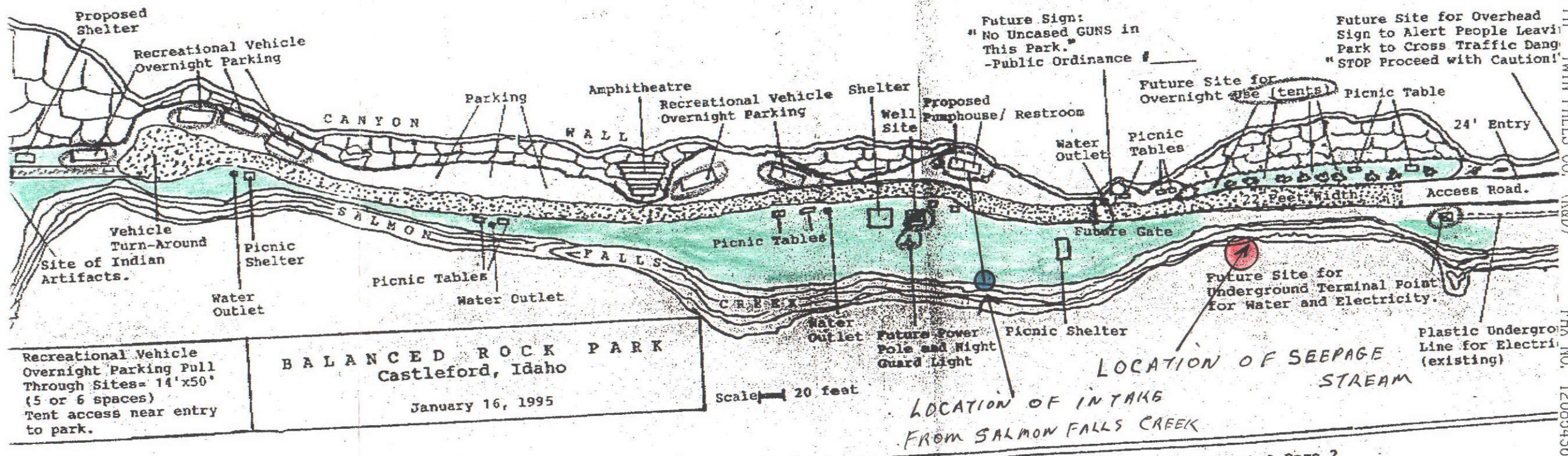
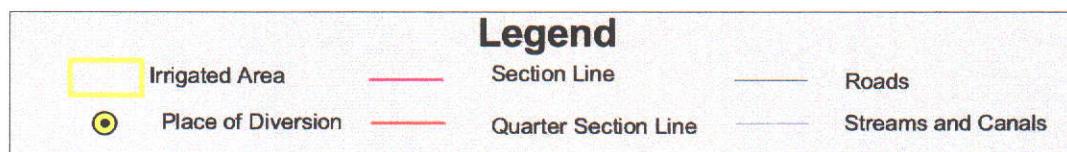
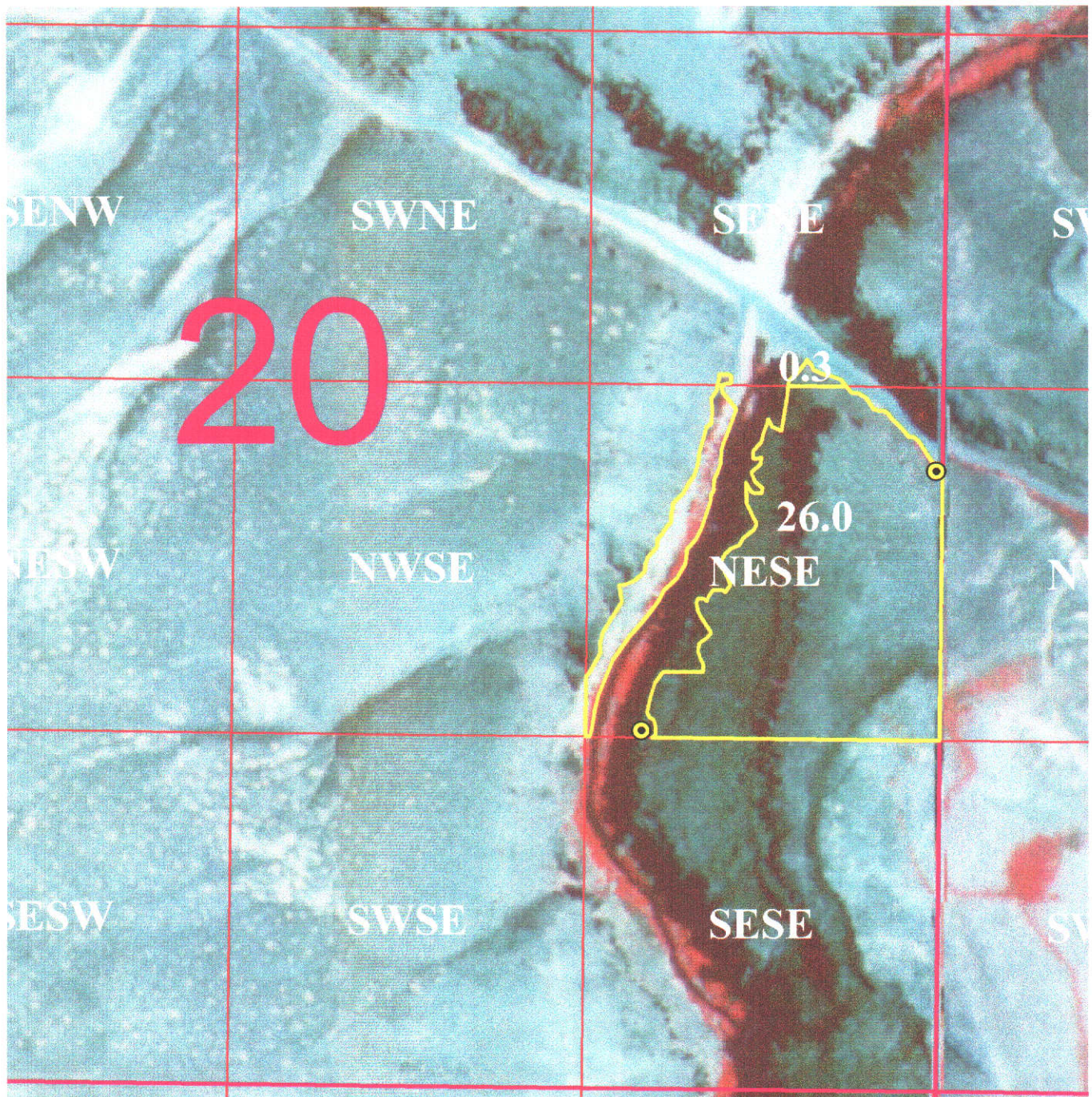




Attachment A-Page 2
Site Plan/Improvements

Water Right Claim Number 47-16769
Township , 10S13E

03/29/2001



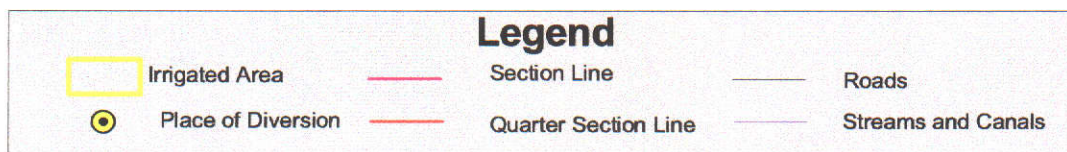
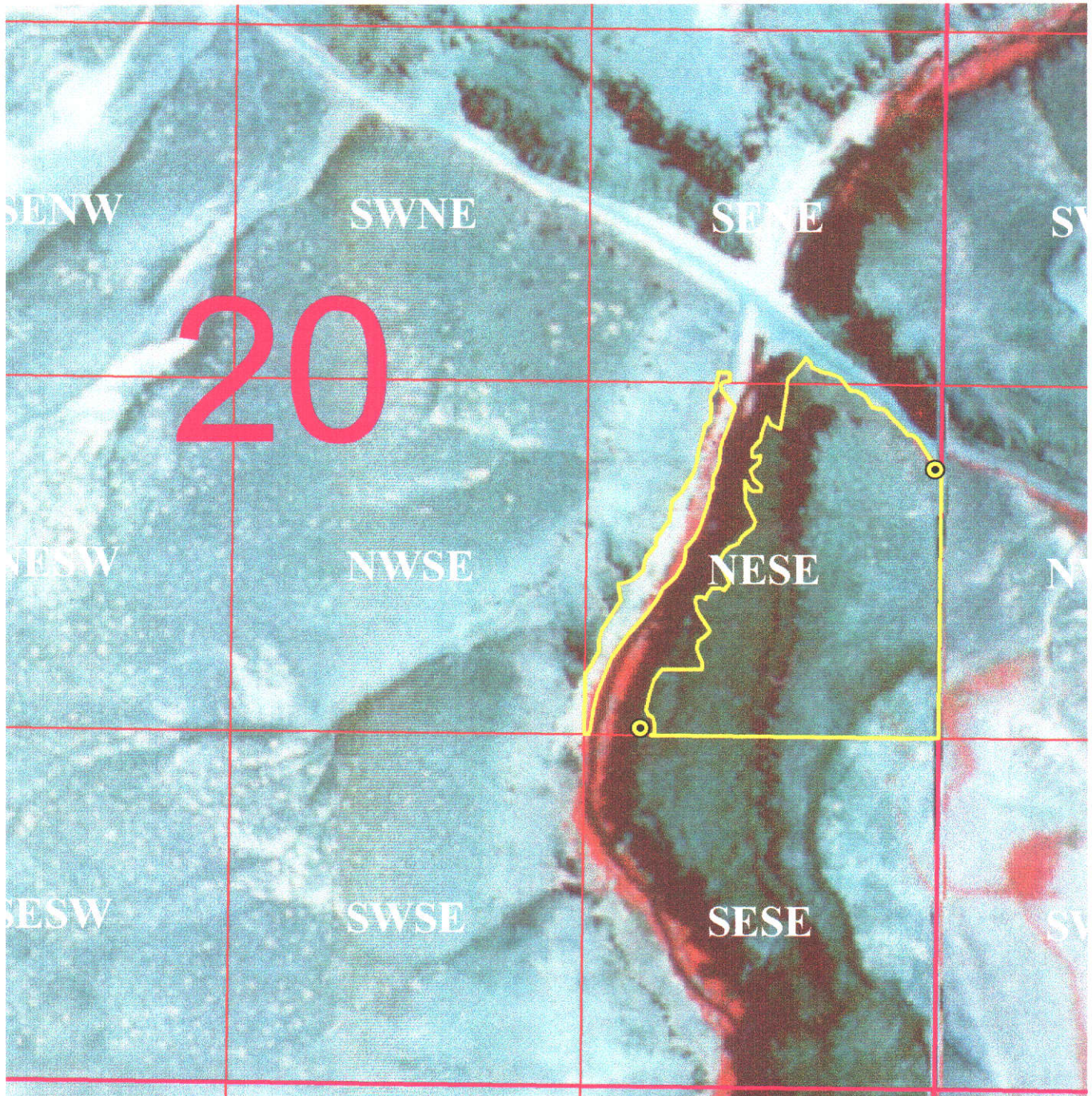
400 0 400 800 Feet



SPATIAL
DYNAMICS

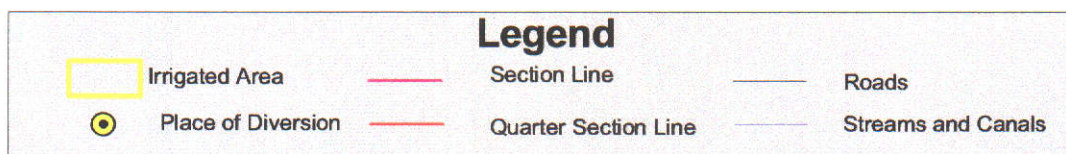
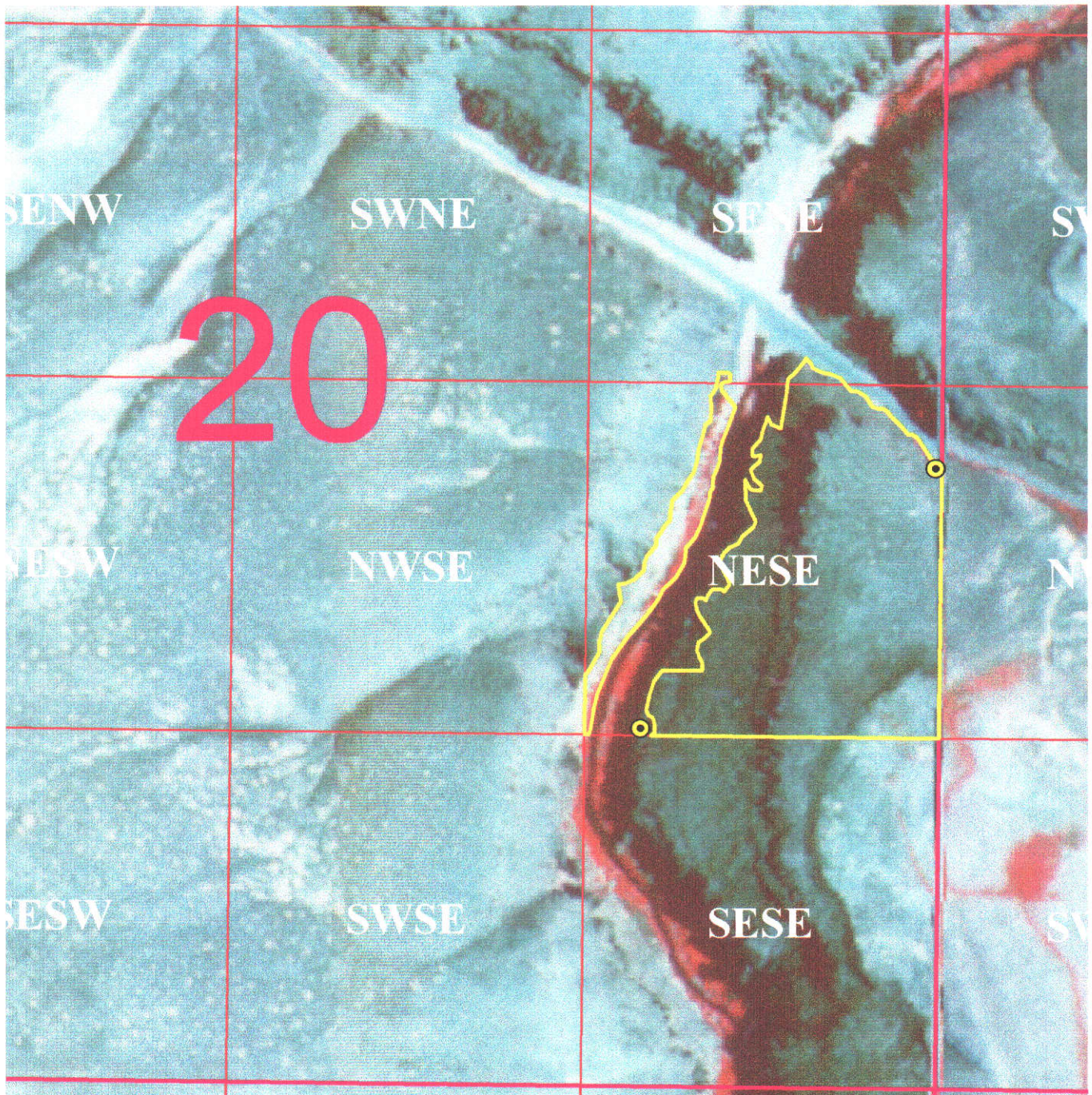
Water Right Claim Number 47-16769
Township , 10S13E

03/29/2001



Water Right Claim Number 47-16769
Township , 10S13E

03/29/2001



400 0 400 800 Feet

 SPATIAL
DYNAMICS

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: A47-16769
Date Received: 5/14/1999
Receipt No: S022146
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: TWIN FALLS COUNTY PARKS 208-734-9491
Address: 450 6TH AVE WEST
TWIN FALLS ID 83301
2. Date of Priority: OCT 1, 1969
3. Source: UNNAMED STREAM Trib. to: SALMON FALLS CREEK
SALMON FALLS CREEK SNAKE RIVER
4. Point of Diversion:
- | Township | Range | Section | 1/4 of | 1/4 of | 1/4 of | Lot | County |
|----------|-------|---------|--------|--------|--------|-----|------------|
| 10S | 13E | 20 | NE | SE | | | TWIN FALLS |
5. Description of diverting works:
SPRINKLER SYSTEM FOR SEED AND LANDSCAPE
6. Water is used for the following purposes:
- | Purpose | From | To | C.F.S | (or) | A.F.A. |
|------------|-------|-------|-------|------|--------|
| IRRIGATION | 04/01 | 10/31 | 0.070 | | |
7. Total Quantity Appropriated is:
0.070 C.F.S. (and/or) A.F.A.
8. Total consumptive use is Acre Feet Per Annum.
9. Non-irrigation uses:
NONE
10. Place of Use:
- | Township | Range | Section | 1/4 of | 1/4 of | Lot | Use | Acres |
|----------|-------|---------|--------|--------|-----|-----|-------|
| 10S | 13E | 20 | SE | NE | | IRR | 0.5 |
| | | | NE | SE | | IRR | 1.0 |

10. Place of Use: Continued

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
					Section Acres	1.5
					Total Acres	1.5

11. Place of use in counties: TWIN FALLS

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

13. Other Water Rights Used:

14. Remarks:

SEE ORIGINAL CLAIM FOR ADDITIONAL DESCRIPTION OF DIVERSION WORKS
AND HISTORY OF SYSTEM DEVELOPMENT.
PLACE OF USE IS BALANCED ROCK PARK.

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: _____

Check No. 1999-11548

Date	Description	Account Number	Amount
5/04/1999	PYMT FOR CLAIM OF WATER USE AT BALANCED ROCK PARK	414.02.056.00	102.00

Twin Falls County

Box 126

Twin Falls, Idaho 83303-0126

*

Please Detach and Retain for your records

RECEIPT
For Monies Paid
to the
Idaho Department of Water Resources

Receipt No: **S022146**

Date:
Time: **5/14/1999**
11:19:36

Received
From: **T F CTY PARKS & REC**

Type of Payment

Program A cct

Amount

ADJUDICATION FEE	41503	337	1155	52.00
LATE FEE	41503	337	1155	50.00

CHECK 11548

Total \$ 102.00

A47-16769

Water Right Numbers

Region: SOUTHERN

Signature: *Janie Robertson*

RECEIVED

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

MAY 13 1999

Department of Water Resources
Southern RegionIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER:

Ident. Number

Date Received

Receipt Number

447-16769

5-13-99

5022146

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Twin Falls County Parks Phone (208) 734-9491Mailing Address 450 6th Avenue West Zip 833012. Date of Priority (Only one (1) per claim) 10-1-693. Source of water supply (a) Salmon Falls Creek and unnamed stream
which is tributary to (b) Snake River and Salmon Falls Creek4. a. Location of existing point of diversion is: Township 10S Range 13E Section 20,1/4 of NE 1/4 of SE 1/4, Govt. Lot, B.M., County of Twin FallsAdditional points of diversion if any: Seepage stream on East side of creek in same 40 acre tract described above.

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, 1/4 of _____ 1/4 of _____

1/4, Govt. Lot B.M., County of

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. Sprinkler system, seed, & landscape
Oct. 68 to Oct. 69. 1969-1986 Flood irrigate with 30gpm pump gas engine from
Salmon Falls Creek &/or unnamed stream. 1985 installed line from hot water well
on North side of park. Water pressure decreased during irrigation season,
continued to flood irrigate with 30gpm pump. 1995 drilled well w/30gpm -
installed new sprinkler system, electricity, pumphouse, and restroom. Not
sufficient water to operate system. 1999 revamped water intake line into
Salmon Falls Creek. Sprinkler system is still 30gpm. No longer divert water
from unnamed stream. Now the only source of irrigation water is from Salmon
Falls Creek.

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For irrigation purposes from 4-1 to 10-31 amount 0.07 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 0.07 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) NONE from this system

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
10S	13E	20				0.5									1.0				1.5

Total number of acres irrigated 1.5

11. In which county (ies) are lands listed above as place of use located? Twin Falls

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 None (X)

14. Remarks:

Last Name _____ Ident No. _____

Copies: White -State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use ☒ Posted Notice _____ License _____ Permit _____

Decree _____

If applicable provide IDWR Water Right Number _____

Court _____ Case Number _____ Decree Date _____

Plaintiff vs Defendant _____

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

Signature of Claimant (s) _____ Date _____

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am Commission CHAIRMAN

Title

of Twin Falls County _____, that I have signed the foregoing

Organization

document in the space below as Commissioner of Twin Falls County

Title

Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent J. L. Morgan

Title and Organization Commissioner, Twin Falls County Date 4-30-99

State of Idaho/or _____)

County of Twin Falls)

SS.

Subscribed and sworn (or affirmed) before me this 30TH day of APRIL 19 99

SEAL

Notary Public Jody Galan

Residing at Twin Falls

My Commission Expires 4-30-03

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, Twin Falls County Prosecutor's Office will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature Rosemary Emery Rosemary Emery, Chief Civil Deputy Prosecutor

Address P.O. Box 126, Twin Falls, ID 83303-0126

Date 5-7-99

Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant

Scale: 2 inches equals 1 mile

A 16x16 grid of squares. Each square contains a crosshair pattern formed by two perpendicular dashed lines intersecting at the center. The grid is composed of 16 columns and 16 rows of these squares.

Copies: White-State, Yellow-Claimant

DEPARTMENT OF THE INTERIOR
BUREAU OF OUTDOOR RECREATION
PROJECT PROPOSAL - DEVELOPMENT

LEAVE BLANK FOR BOR USE ONLY

Date Received Priority Project Number

Project Officer

Use this form for submission of individual projects which will develop lands and waters to facilitate their use by the public for outdoor recreation. If concurrent Acquisition is being undertaken, check here ☐

SECTION 1

1. State or Territory

IDAHO

2. Name and address of agency responsible for project

IDAHO DEPT. OF PARKS, STATEHOUSE, BOISE, IDAHO 83702

3. Project Title

BALANCE ROCK RECREATION AREA

4. Brief description of project

A recreation area to be developed adjacent to the Salmon Falls Creek in the bottom of 460' deep canyon consisting of the following:

- 1- Land leveling, grading & graveling, parking areas and roadways
- 2- Drinking fountains and sprinkeling system
- 3- Landscaping
- 4- Construction of 25 picnic units
- 5- Restroom facilities
- 6- Trails and foot bridges
- 7- Signing for routes to Recreation area
- 8- Shelter House at Balance Rock View point

5. Duration of project

from Jun:67-'72

6. Federal assistance requested

\$25,000.00

7. Recommended priority

8. Name, Organization, and Title of individual having day-to-day responsibility for direction of project

George A. Ottens, Twin Falls County Park & Recreation Comm. Planning & Zoning Director)

9. Name and Address to appear on check

IDAHO DEPT. OF PARKS
STATEHOUSE
BOISE, IDAHO 83702

10. TERMS AND CONDITIONS: In submitting this Project Proposal, the State hereby accepts the Terms and Conditions set forth in the BOR Grants-in-Aid Manual, which will be a part of the Project Agreement for any grant awarded under this proposal.

11. CERTIFICATION: As the official designated to represent the State and act for the State for purposes of the Land and Water Conservation Fund Act, I recommend that assistance be made available from the Fund, when monies are available, in accordance with the recommended priority. No financial assistance has been given or promised under any other Federal program or activity with regard to the proposed project. The State or public agency to be responsible for the proposed project has the ability and

intention to finance its share of the costs of this project. The Applicant will not discriminate against any person on the basis of race, color, or national origin in the use of any property or facility acquired or developed pursuant to this proposal, and shall comply with the terms and intent of Title VI of the Civil Rights Act of 1964, P. L. 88-354 (1964), and of the regulations promulgated pursuant to such Act by the Secretary of the Interior and contained in 43 CFR 17.

(Signature)

WILHELM M. BECKERT

(Name)

(Date)

STATE LIAISON OFFICER

(Title)

12. For State use

Twin Falls County agrees to comply with all of the terms of this proposal and project agreement

Date: _____

Heber Loughmiller, Chairman
Board of County Commissioners
Twin Falls County, Idaho

SECTION 11 - TABULAR SUMMARY OF PROJECT ELEMENTS AND COSTS

Identify the phase or element of the Development Project suggested by the line items. Indicate additional breakdown of work elements necessary and desirable to allocate work assignments and costs.

	DATE OF		ESTIMATED COST	TOTAL ESTIMATED COST		\$	
	BEGINNING	COMPLETION		Amount of Federal development assistance requested			
DEVELOP SITE PLANS & SPECIFICATIONS				Source of remainder of funds			
A. Site plans	Jun. 67	Sept 67	\$1,500.				
B. Specs.							
DEVELOP CONSTRUCTION PLANS AND SPECIFICATIONS				FOR CONCURRENT ACQUISITION AND DEVELOPMENT PROJECT SUBMISSIONS			
A. Engineering Plns. "	"		\$1500.	Total estimated acquisition value		\$	
B.				Total estimated development costs		\$	
PREPARE SITE				TOTAL		\$	
				Total amount of Federal assistance requested		\$	
Leveling, roads &				Source of remainder of funds			
B. Parking area	Oct 67	Oct 68	\$10,000.				
UNDERTAKE CONSTRUCTION							
Sprinkler system							
seed, & landscap	Oct 68	Oct 69	\$10,000.	SIZE IN ACRES OF ENTIRE AREA OR PARK	SIZE IN ACRES OF AREA TO BE DEVELOPED UNDER THIS PROPOSAL		
OTHER							
Picnic units &				Land	Water	Land	Water
Rest rooms	Oct 69	Oct 70	\$10,000.				
Trails & Shelt. House	70	Oct 71	\$18,000.				
Signing	Oct. 71	Jun 72	\$1,500	SECTION 10 - ATTACHMENTS			

SECTION 11 - ATTACHMENTS

Attach, by reference number, the following supplemental documents necessary to process this Development Project Proposal:

- D-660-1 *Project Plan and Justification.* A. Description of how the proposed project is in accord with the State outdoor recreation plan and would help meet priority needs identified in the plan. B. Summary of area, its nature and relation of development to the area. Indicate how the natural beauty of area will be enhanced. C. Descriptive outline of proposed accomplishments with funds requested. Indicate contemplated other uses of the area. D. List of names of organizations which will undertake the development and how this will be performed. E. Economic feasibility data, or other types of data to indicate extent and kind of use to be made of the completed area or facility. F. Plans for operations and maintenance.
- D-660-2 *Maps and Charts.* A. Simple site plans or maps showing total area, in addition to area to be developed. Annotate to show plans for, or existing streets, highways, waterlines, sewers, etc. to be located on or near the area. (Key to allow location within State, County, or city.) Indicate uses now made of the area by applicant or other agencies or individuals. B. Description of all legal rights to the area to be held by applicant and any other person or organization.
- D-660-3 *Agreements.* A. Agreements or arrangements made with other organizations for participating in project, including operation and maintenance of completed facility.

The terms shown below need *not* be submitted with the project proposal. However, during the course of execution of an approved project, the applicant should be prepared to submit them to the Bureau for review, as follows:

- D-660-4 *Plans.* A. Site plans, specifications and cost estimates. B. Construction plans, specifications and cost estimates. These *must* be submitted for review and approval before construction may proceed on a structure to cost in excess of \$100,000.
- D-660-5 *Contracts.* A. Copies of pertinent contracts, as specifically required by the Bureau of Outdoor Recreation.

DEPARTMENT OF THE INTERIOR
BUREAU OF OUTDOOR RECREATION
PROJECT PROPOSAL - DEVELOPMENT

LEAVE BLANK FOR BOR USE ONLY

Date Received Priority Project Number

Project Officer

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- 2- Drinking fountains and irrigation system
- 3- Landscaping
- 4- Construction of 25 Picnic Units
- 5- Restrooms
- 6- Trails
- 7- Signing

5. Duration of project

from 5/68 to 5/69

6. Federal assistance requested

\$ 15,000.00

7. Recommended priority

8. Name, Organization, and Title of individual having day-to-day responsibility for direction of project

George A. Ottens, Twin Falls County
~~Twin Falls~~ Parks and Recreation Comm.

9. Name and Address to appear on check

IDAHO DEPT. OF PARKS
STATEHOUSE
BOISE, IDAHO 83702

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11. CERTIFICATION: As the official designated to represent the State and act for the State for purposes of the Land and Water Conservation Fund Act, I recommend that assistance be made available from the Fund, when monies are available, in accordance with the recommended priority. No financial assistance has been given or promised under any other Federal program or activity with regard to the proposed project. The State or public agency to be responsible for the proposed project has the ability and

intention to finance its share of the costs of this project. The Applicant will not discriminate against any person on the basis of race, color, or national origin in the use of any property or facility acquired or developed pursuant to this proposal, and shall comply with the terms and intent of Title VI of the Civil Rights Act of 1964, P. L. 88-354 (1964), and of the regulations promulgated pursuant to such Act by the Secretary of the Interior and contained in 43 CFR 17.

(Signature)

(Date)

WILHELM M. BECKERT

(Name)

STATE LIAISON OFFICER

(Title)

12. For State use

Twin Falls County agrees to comply with all of the terms of this proposal and project agreements;

Date: _____

Heber Loughmiller
Heber Loughmiller, Chairman
Board of County Commissioners
Twin Falls County

SECTION 11 - TABULAR SUMMARY OF PROJECT ELEMENTS AND COSTS

Identify the phase or element of the Development Project suggested by the line items. Indicate additional breakdown of work elements necessary and desirable to allocate work assignments and costs.

	DATE OF		ESTIMATED COST	TOTAL ESTIMATED COST	
	BEGINNING	COMPLETION		Amount of Federal development assistance requested	\$
DEVELOP SITE PLANS & SPECIFICATIONS					\$ 30,000.00
A.				Source of remainder of funds	\$15,000.00
B.				County 1/2 mill tax levy for fecreation	
DEVELOP CONSTRUCTION PLANS AND SPECIFICATIONS				FOR CONCURRENT ACQUISITION AND DEVELOPMENT PROJECT SUBMISSIONS	
A.				Total estimated acquisition value	\$
B.				Total estimated development costs	\$
PREPARE SITE leveling, roads & parking area			10,000.	TOTAL	\$
B.				Total amount of Federal assistance requested	\$
UNDERTAKE CONSTRUCTION				Source of remainder of funds	
A. Const. facilities			11,900.	1/2 Mil levee Twin Falls County	
B.				SIZE IN ACRES OF ENTIRE AREA OR PARK	SIZE IN ACRES OF AREA TO BE DEVELOPED UNDER THIS PROPOSAL
OTHER				Land	Water
A. Rest Rooms			7,200.	620	20
B. 3% Surcharge			900.	620	20

SECTION 111 - ATTACHMENTS

Attach, by reference number, the following supplemental documents necessary to process this Development Project Proposal:

- D-660-1 *Project Plan and Justification.* A. Description of how the proposed project is in accord with the State outdoor recreation plan and would help meet priority needs identified in the plan. B. Summary of area, its nature and relation of development to the area. Indicate how the natural beauty of area will be enchanced. C. Descriptive outline of proposed accomplishments with funds requested. Indicate contemplated other uses of the area. D. List of names of organizations which will undertake the development and how this will be performed. E. Economic feasibility data, or other types of data to indicate extent and kind of use to be made of the completed area or facility. F. Plans for operations and maintenance.
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- D-660-5 *Contracts.* A. Copies of pertinent contracts, as specifically required by the Bureau of Outdoor Recreation.

WD0731NP
(00-0731)

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLING PERMIT NUMBER INDEX

DATE: 04/15/99
PAGE: 1

PERMIT NUMBER	OWNER CODE	NAME & ADDRESS	TWP	RGE	SEC	TRACT	LOT	COUNTY	ACC FLG
47-95-S-0179-000	K O	TWIN FALLS COUNTY COUNTY OF TWIN FALLS DEPT OF PARKS & RECREATION 450 6TH AVE WEST TWIN FALLS, ID 83301 (208) 734-9491	10S	13E	20	SW NE SE		TWIN FALLS	L

Subdivision Well Site Location and Description:

Subdivision Name:

Well Site Address: BALANCED ROCK PARK

City, State:

Lot(s):

Block(s):

Geographic Location:

GPS Site ID:

Lat: : : N

Long: : : W

Accuracy Code:

Proposed Use of Well: Domestic
Anticipated Bottom Hole Temperature: 85F or Less

Proposed Casing Diameter: 6 In.

Proposed Depth: 150 Ft.

Well Use Comments:

Driller License No: 0540

Firm Name: BISHOP DRILLING
Official: RON BISHOP

Permit Status: Filed

Verbal Issue Date:
Date Received: 11/13/1995
Date Approved: 11/13/1995
Proposed Start Date: 11/15/1995
Extension Date:
Extension Expiration:

Receipt No.	Receipt Date	Fee
S018654	11/13/1995	\$ 35.00
	NOT ON FILE	
	NOT ON FILE	
	NOT ON FILE	
	NOT ON FILE	

Specific Conditions:

Permit Remarks:

Conditions of Approval: This drilling permit is valid for two (2) months from the approval date for the start of construction and is valid for one (1) year from the approval date for completion of the well unless an extension has been granted.

This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare which may be required prior to construction of this well. The local Health Department should be contacted for septic tank/drainfield locations. Domestic wells must not be drilled closer than 100' from any drainfield and 50' from any septic tank. Public Water Supply wells must not be drilled closer than 100' from any drainfield or septic tank.

The well shall be constructed by a driller currently licensed in the state of Idaho who must maintain a copy of the drilling permit at the drilling site.

Approval of this drilling permit does not authorize trespass on the land of

=====

WELL DRILLING PERMIT NUMBER INDEX: Permit No. 47-95-S-0179-000 (cont'd)

Conditions of approval: another party.

This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.

This drilling permit does not represent a right to divert and use the water of the State of Idaho.

If a bottom hole temperature of 85 Degrees F (29.44 oC) or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.

Idaho Code, S 55-2201 - 55-2210 requires the applicant and/or his contractors to contact "Digline" (DigLine is a one-call center for utility notification) not less than 2 working days prior to the start of any excavation for this project. The "Dig Line " Number for your area is 1- - - - .

The use of water from this well is for Domestic purposes only which includes irrigation of up to 1/2 acre of land with all combined uses not to exceed 13,000 gallons per day (42-111[A]), or for Domestic uses other than for homes, organization camps, public campgrounds or livestock where the diversion rate and volume does not exceed .04 cfs and 2500 gpd (42-111[B]).

----- WELL DRILLER'S LOG REPORT -----

Drilling Permit No: 47-95-S-0179-000
Log Status: Sent To/Microfilmed

Water Right No:
Injection Permit No:

Nature of Work: NEW WELL

Construction Method: AIR ROTARY

Number of Monitor Wells:

Casing Diameter: 6 In.
Depth of Casing: 25 Ft.
Total Depth: 253 Ft.
Screen Installed? No

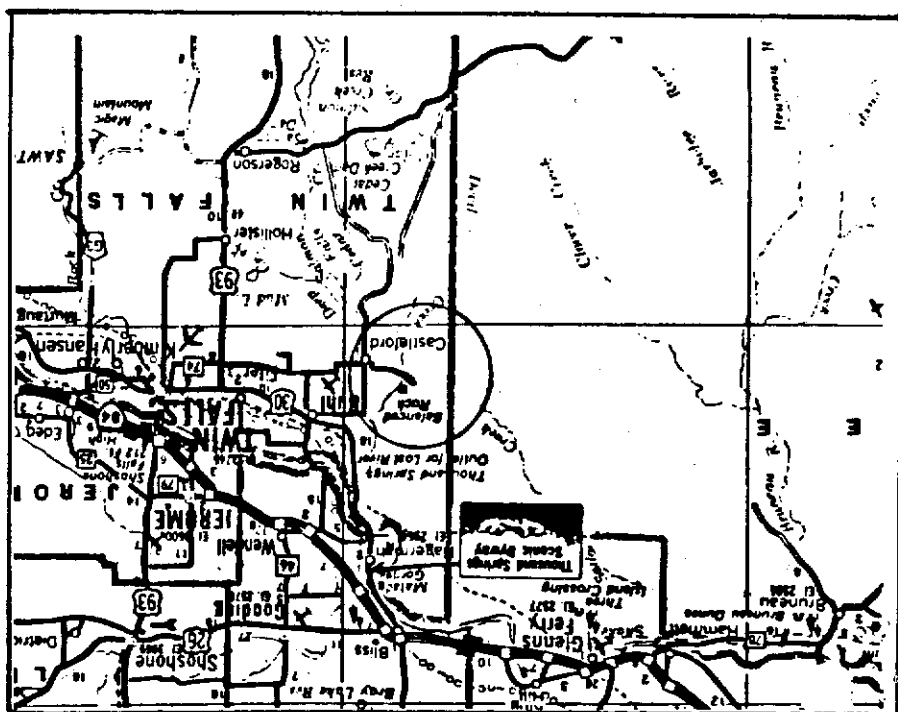
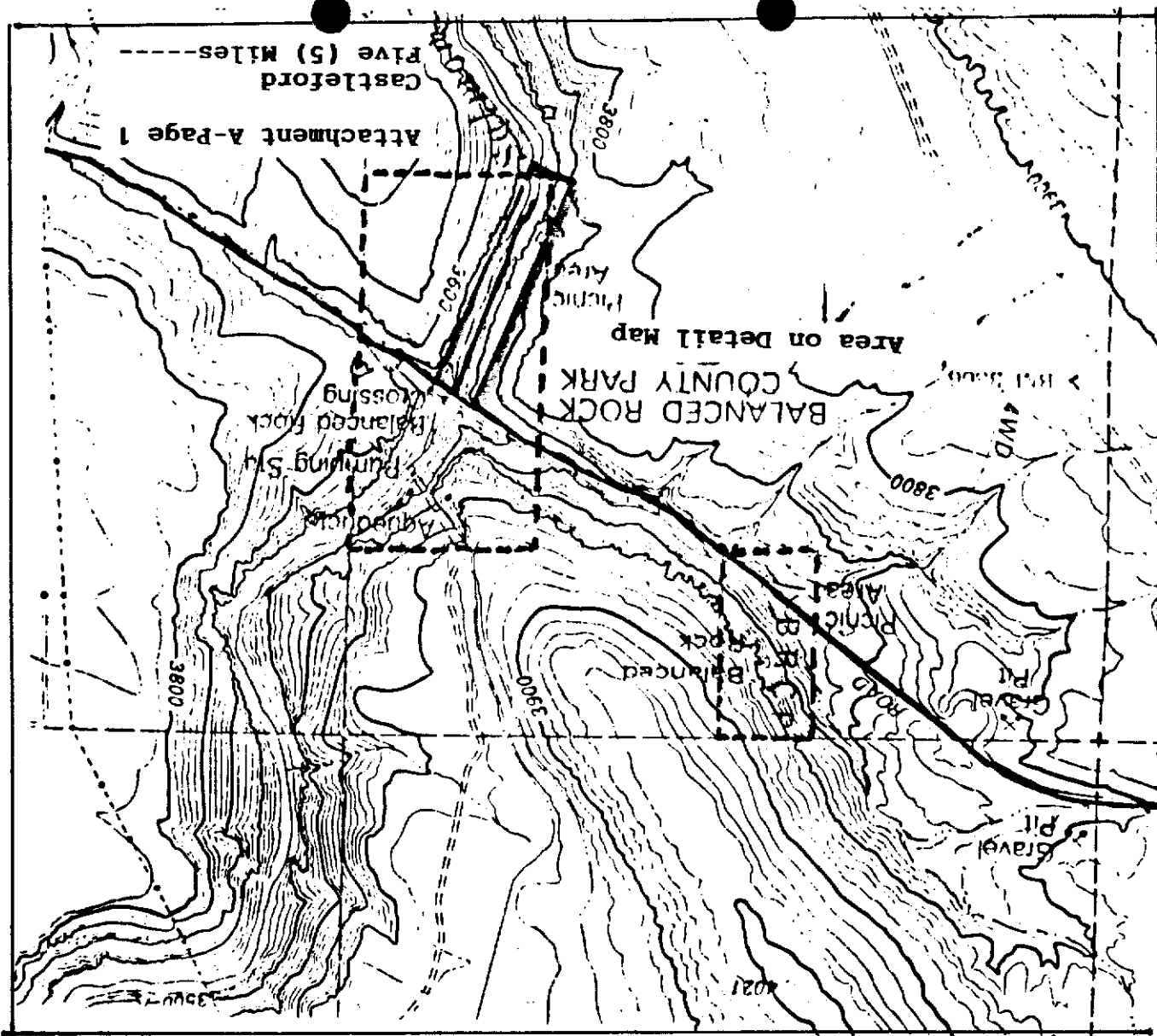
Static Water Level: 15 Ft.
Temperature: F.
Production Rate: 40.00 GPM

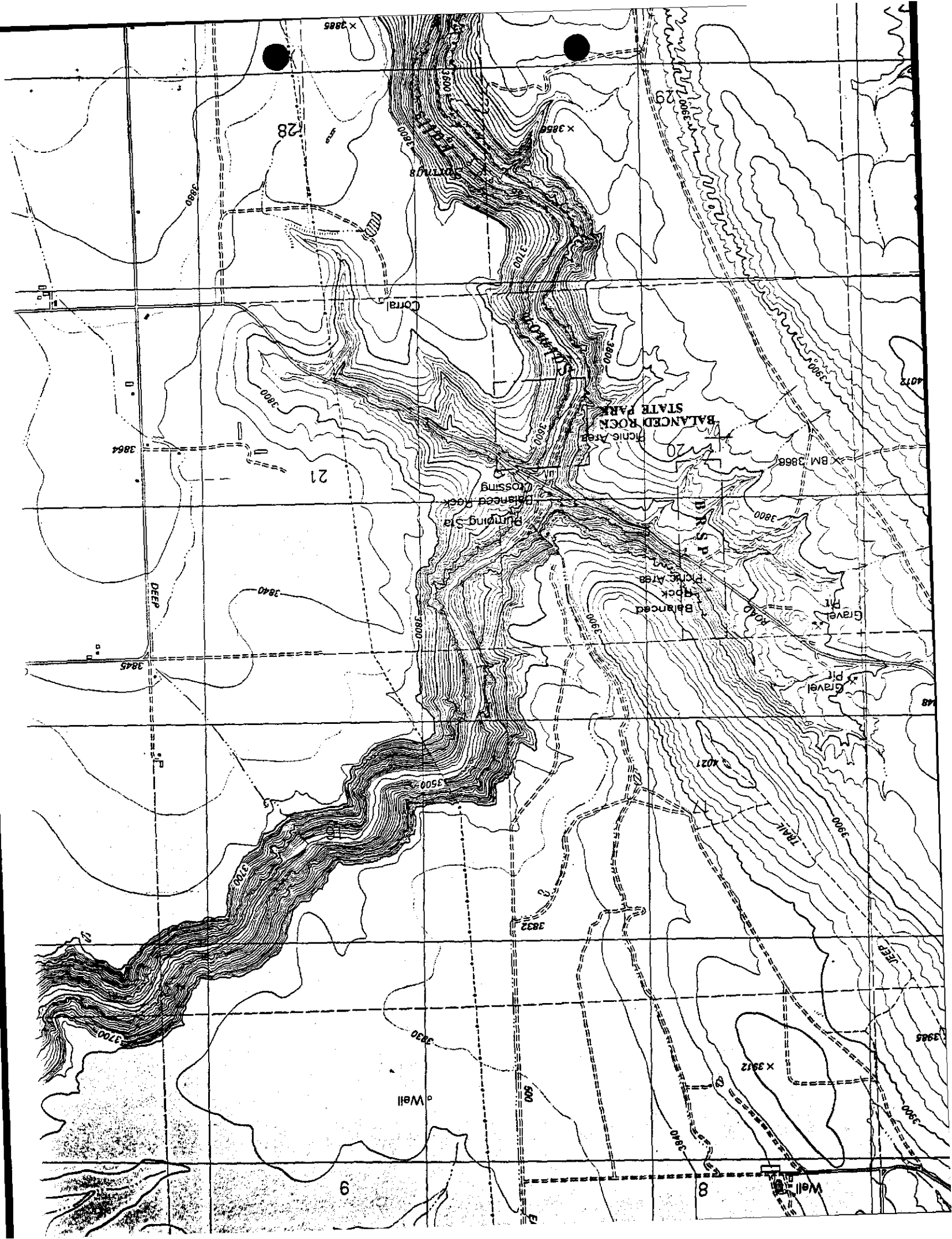
Actual Start Date: 12/11/1995
Well Finish Date: 12/13/1995
Log Received Date: 01/10/1996
Certification Date: 01/05/1996
Field Inspection Date:

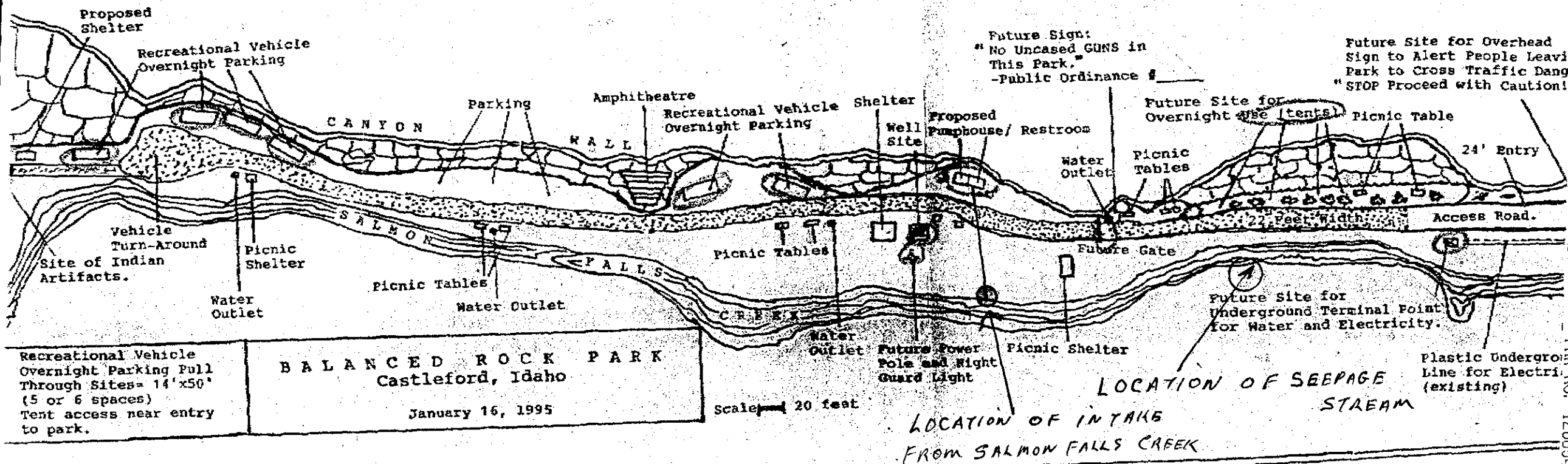
Inspector:

Violation Flag:

Well Log Remarks: DRILLER COMMENTS: VERY LITTLE WATER UNTIL 228 FT., LOTS OF WATER
BELOW CLAY
SURFACE SEAL FROM +1 TO 25 FT. CEMENT USED, MIX & POUR METHOD.
COMPLETED DEPTH 253 FT.







Attachment A-Page 2
Site Plan/Improvements



State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037

SOUTHERN REGION

May 14, 1999

DIRK KEMPTHORNE
GOVERNOR

KARL J. DREHER
DIRECTOR

ROSEMARY EMORY
CHIEF CIVIL DEPUTY PROSECUTOR
TWIN FALLS COUNTY PROSECUTOR'S OFFICE
PO BOX 126
TWIN FALLS ID 83303-0126

RE: ADJUDICATION CLAIM NO. A47-16769 - TF CTY PARKS

Ms. Emory:

Pursuant to the notification that you are representing the claimants on the above referenced Adjudication Claim, please find enclosed the receipt and a copy of the computer generated claim based on the information from the original claim which has been entered in our computer records.

Please review the records and if you have any corrections or any questions, feel free to contact this office.

Sincerely,

A handwritten signature in cursive script that reads 'Jeanie'.

Jeanie Robertson
Sr. Water Rights Agent

cc: TF CTY PARKS
/jr
Enclosures

Log for claim 47-16769

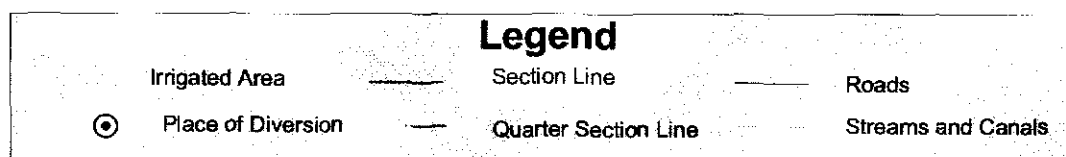
Spatial Dynamics LTD

3/29/01

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
10s13e	20	SENE	0.5	0.3	
10s13e	20	NESE	1	26	POD placement? / Indiscernible
Totals:			1.5	26.3	

Water Right Claim Number 47-16769
Township , 10S13E

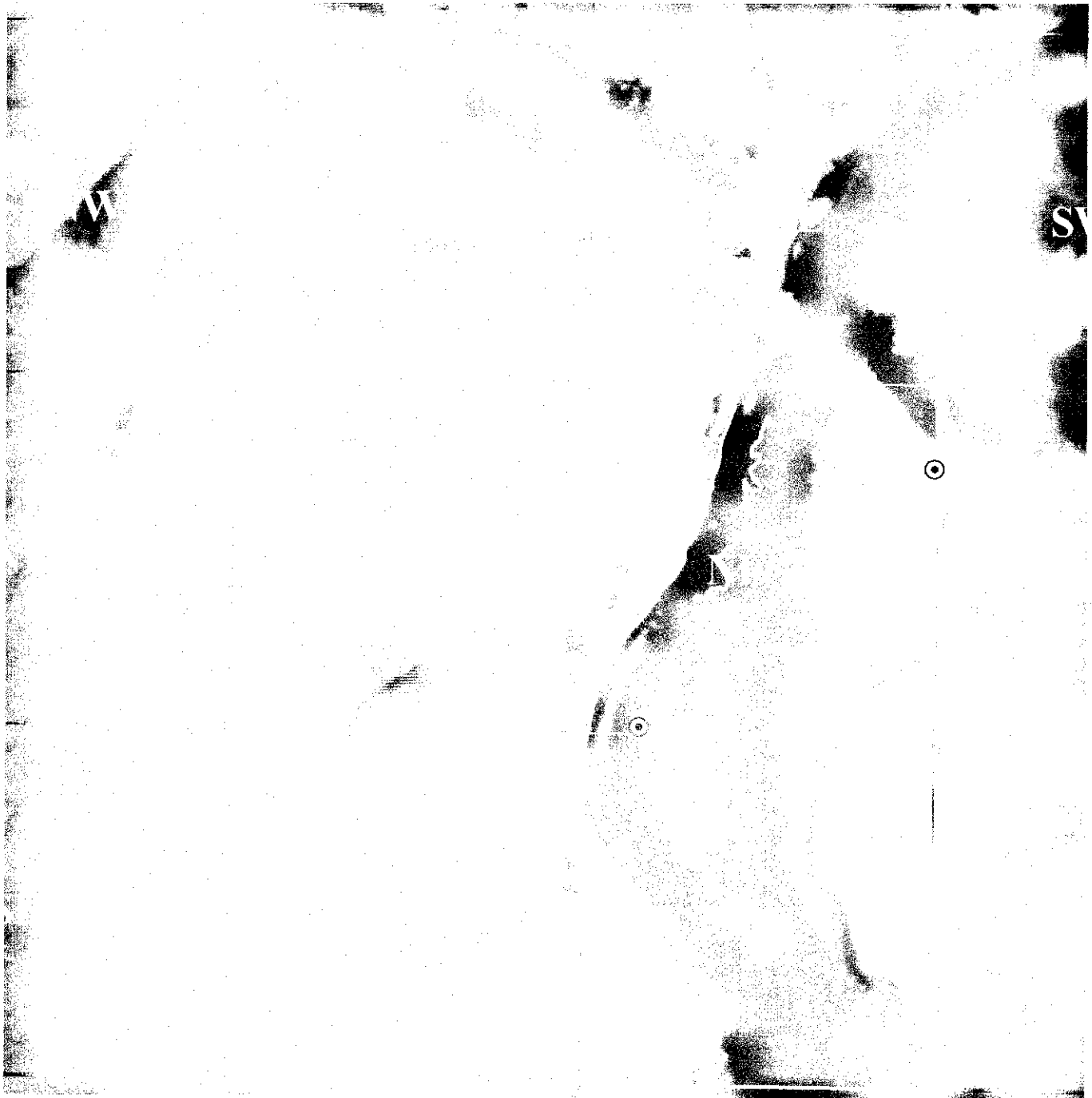
03/29/2001



SPATIAL
DYNAMICS

Water Right Claim Number 47-16769
Township , 10S13E

03/29/2001



Legend			
Irrigated Area	_____	Section Line	_____
Place of Diversion	⊙	Quarter Section Line	_____
		Roads	_____
		Streams and Canals	_____

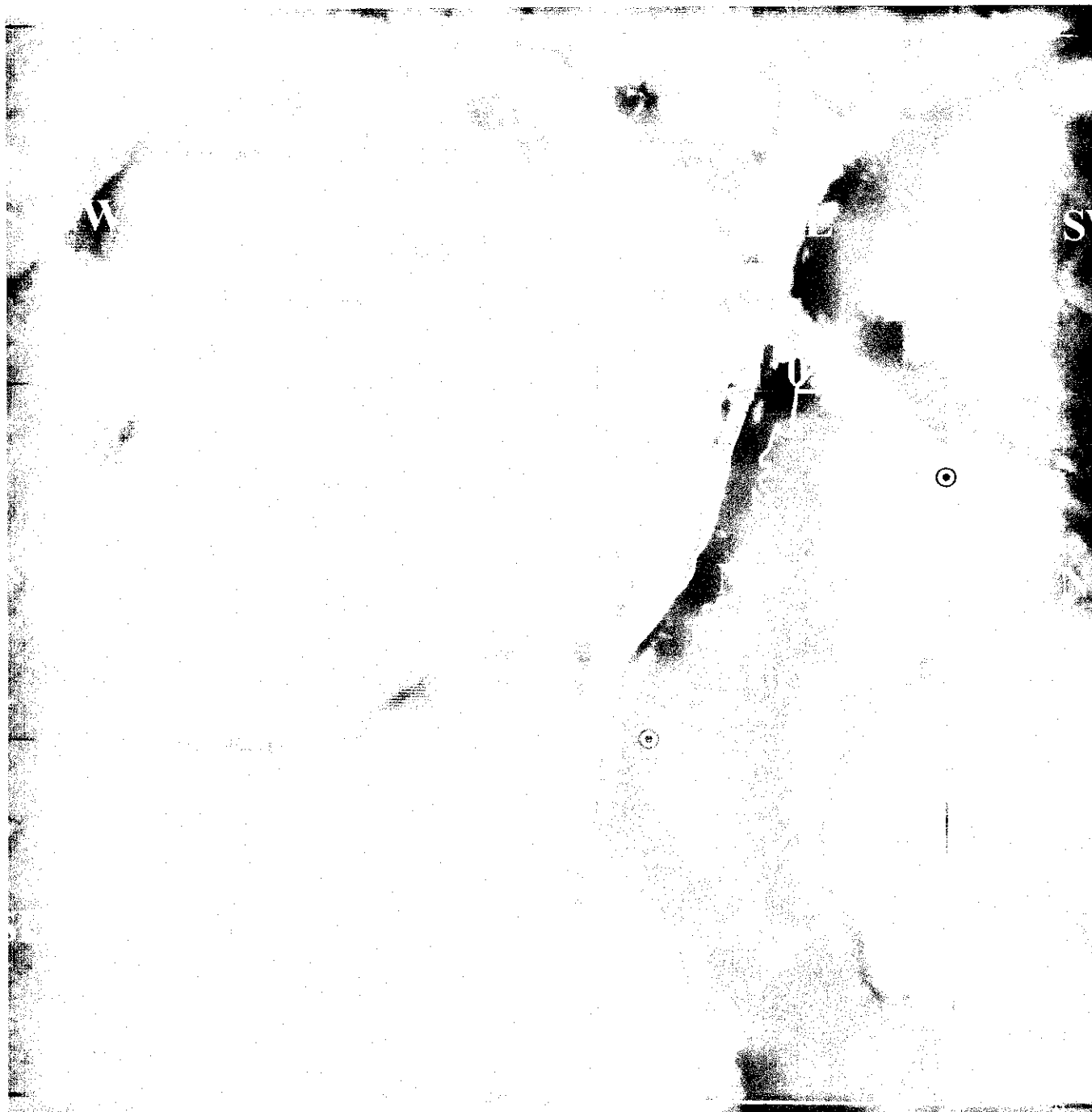
400 0 400 800 Feet



SPATIAL
DYNAMICS

Water Right Claim Number 47-16769
Township , 10S13E

03/29/2001



Legend			
 Irrigated Area	 Section Line	 Roads	
 Place of Diversion	 Quarter Section Line	 Streams and Canals	



400 0 400 800 Feet



 SPATIAL
DYNAMICS

AJ5809NP
No. A47-16769

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT

DATE: 02/12/01
PAGE: 229

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	TWIN FALLS COUNTY PARKS 450 6TH AVE WEST TWIN FALLS ID 83301 (208) 734-9491	10/01/1969	IRRIGATION	04-01 10-31	0.070 CFS	
TOTAL DIVERSION:					0.070 CFS	

Water Source: UNNAMED STREAM
SALMON FALLS CREEK

Tributary to: SALMON FALLS CREEK
SNAKE RIVER

Stage: BENEFICIAL USE

Point(s) of Diversion: T10S R13E S20 NESE

TWIN FALLS County

Place of use Legal Description for: IRRIGATION

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:	SUM		
				.5																			
																01							
																TOTAL ACRES				1.5			

POU County: TWIN FALLS

Non-Irrigation Uses: NONE

Remarks: GEN SEE ORIGINAL CLAIM FOR ADDITIONAL DESCRIPTION OF DIVERSION WORKS
AND HISTORY OF SYSTEM DEVELOPMENT.
PLACE OF USE IS BALANCED ROCK PARK.

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

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

Audit: 05/14/99 JROBERTS