

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: A22-11451
Date Received: 8/15/1988
Receipt No: E001954
Received By: ak

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: DIET CENTER, INC. 208-356-9381
Address: 220 S. 2ND WEST
REXBURG, ID 83440

2. Date of Priority: AUG 31, 1960

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
06N	40E	30	SE		NW		MADISON

5. Description of diverting works:
WELL PUMP MAINLINE TO UNDERGROUND SPRINKLER SYSTEM

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.040		

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

8. Total consumptive use is 8.0 Acre Feet Per Annum.

9. Non-irrigation uses:
NONE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
06N	40E	30	SE	NW		IRR	4.0
Section Acres							4.0

A22-11451

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Date: 01/18/89

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10. Place of Use: Continued

Total Acres 4.0

11. Place of use in counties: MADISON

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

13. Other Water Rights Used:

SECOND WELL ON SAME PROPERTY UNDER PERMIT APPLICATION

14. Remarks:

THIS WELL WAS COMPLETED 8/31/60 AND HAS BEEN IN USE SINCE THEN.
POD IS IN BLOCK 7, SOUTH END ADDITION, CITY OF REXBURG, MADISON
COUNTY. (PLAT ATTACHED)

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 _____

RECORDED

NOV 06 1992

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: 39356
Ident. Number A22-11451
Date Received 8/15/88
Receipt Number E001954

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) Diet Center, Inc. Phone (208) 356-9381
Mailing Address 220 South Second West, Rexburg, ID Zip 83440
2. Date of Priority (Only one (1) per claim) August 31, 1960
3. Source of water supply (a) Groundwater
which is tributary to (b) _____
4. a. Location of existing point of diversion is: Township 6N Range 40E Section 30,
_____ 1/4 of SE 1/4 of NW 1/4, Govt. Lot, E. B.M., County of Madison
Additional points of diversion if any: _____
- 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. Well pump mainline to underground
Sprinkler system.

NOV 05 1992

(acre feet)

For _____ purposes from _____ to _____ amount _____ or _____

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.

Copies: White, Yellow, Orange

Scale: 2 inches equals 1 mile

[illegible]

Copies: White-State, Y. Nov. 6 1932

15. Basis of Claim (check one) Beneficial Use X 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 Vice President
Title
of Diet Center, Inc. , that I have signed the foregoing
Organization
document in the space below as Vice President of Diet Center, Inc.
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Richard S. Kennedy

Title and Organization Vice President, Diet Center, Inc. Date 8/11/88

State of Idaho/or _____)
County of Madison) SS.

Subscribed and sworn (or affirmed) before me this 11th day of August 19 88

SEAL

Notary Public William B. Kennedy

Residing at Rexburg, Idaho

My Commission Expires 3/3/92

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, William B. Kennedy 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 William B. Kennedy

Address 220 South Second West, Rexburg, ID 83440

Date August 11, 1988

Last Name Diet Center, Inc. Ident. Number _____

NOV 06 1988
Copies Which State, Below Claimant

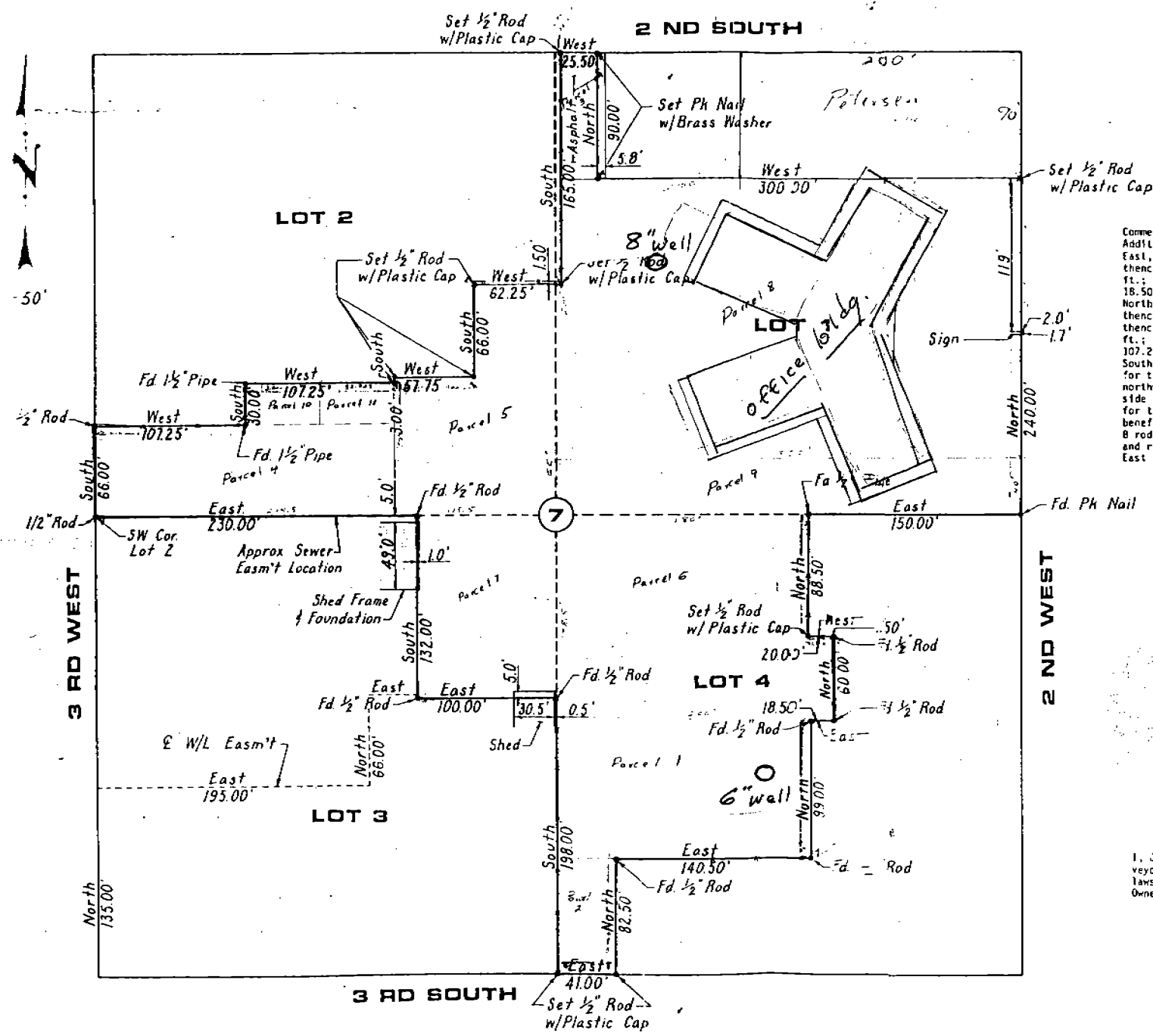
NOV 06 1992

PROPERTY DESC

Commencing at the southwest corner of Addition to the City of Rexburg, Madis East, 230.00 ft.; thence South, 132.00 ft.; thence South, 198.00 ft.; thence East, 11.50 ft.; thence East, 140.50 ft.; thence North 18.50 ft.; thence North, 60.00 ft.; thence North 88.50 ft.; thence East 150.00 ft thence West 300.00 ft.; thence North 9 thence South 165.00 ft.; thence West 6 ft.; thence West, 57.75 ft.; thence So 107.25 ft.; thence South, 30.00 ft.; 1 South, 66.00 ft. to the Point of Begin for the installation and maintenance o northwest corner of Lot 3, Block 7, an side of said lot to the within describ for the installation and maintenance o benefit the within described property, 8 rods 3 feet north of the southwest co and running thence East 11 rods 134 ft. East to the above-described property.

SURVEYOR'S CERTI

I, John B. Hegsted, do hereby certify, veyon, and that I hold Certificate No. laws of the State of Idaho. I further Owners, I have made a survey of the tr



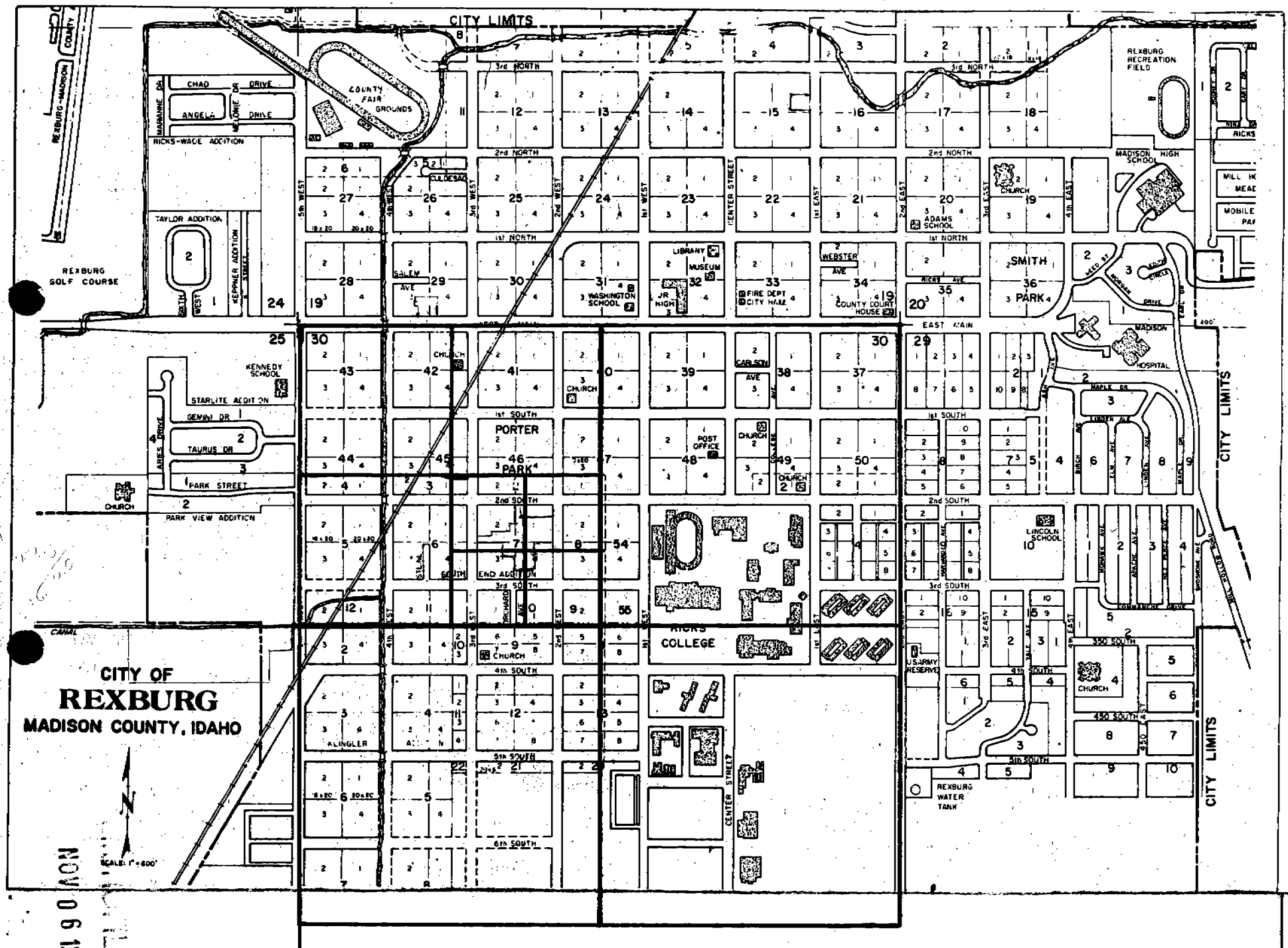
SCALE 1"=50'
DATE 3-15-83
REVISION

BLOCK 7 SOUTHEND ADD.
CITY OF REXBURG

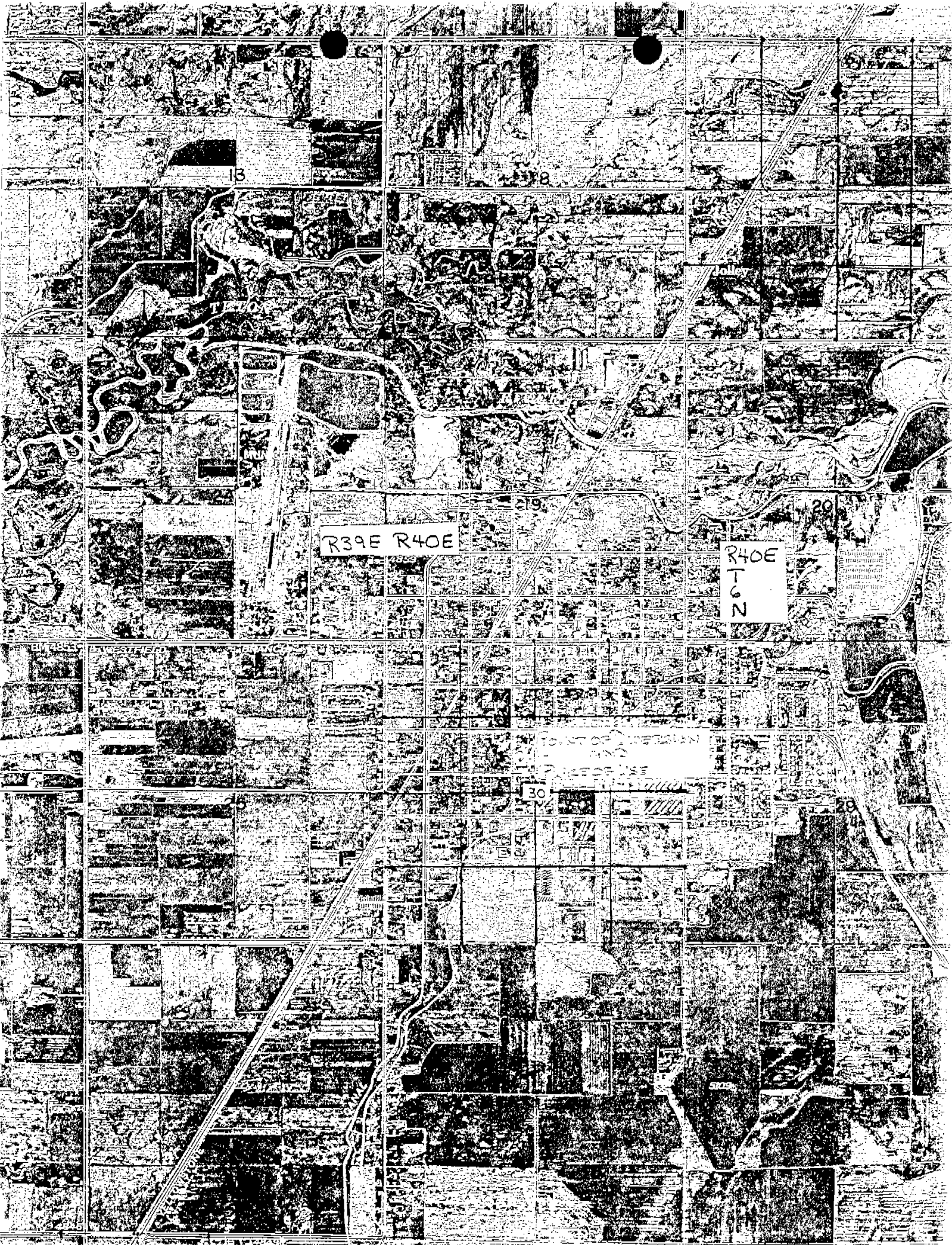


FORSGRENN-PERKINS
ENGINEERING, p.a.

DIET CENTER PT
MAIN OFFICE



Sec. 30, T. 6 N., R. 40 E., 13th M.



Log for claim 22-11451

Spatial Dynamics LTD

7/16/01

TR	SEC	QQ	Acres Claimed	Acres Found	COMMENT
06n40e	30	SENW	4	4.6	
Totals:			4	4.6	

10/19/1988

SRBA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME Dick C. Cota, Jr. CLAIM ID NO. A22-1145

DATE RECEIVED 8-15-88 CK # 592449 AMOUNT \$ 542

- | | YES | NO |
|--|-------------------------------------|--------------------------|
| 1. Is the name and address complete with zip code? | ☒ | ☐ |
| 2. Is a priority date entered? | ☒ | ☐ |

Is the water use exempt from the Permit requirements, or if it is not exempt, has a Permit been approved or a License issued?
A Permit is required: (1) for groundwater developed after March 25, 1963 (except single family domestic and stockwater wells using less than 13,000 gpd), or (2) for surface water developed after May 20, 1971 (except for instream stockwater). USE CARE IF CLAIM IS RETURNED. REFER TO ADJUDICATION MEMOS # 1 (ADJ. CLAIMS/APPLICATIONS) AND # 9 (REJECTION OF CLAIMS). EXPLAIN IN COMMENTS.

- | | | |
|---|-------------------------------------|--------------------------|
| 3. (a) Is a source entered? | ☒ | ☐ |
| (b) Is a tributary to entered? (if required) | N/A | ☐ |
| 4. Is the legal description of the p.d. sufficient? | ☒ | ☐ |
| 5. Is there a description of the diverting works? | ☒ | ☐ |
| 6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. | ☒ | ☐ |
| Is the period of use included? | ☒ | ☐ |
| Is a quantity claimed for each use? | ☒ | ☐ |
| 7. Is a total quantity claimed entered? | ☒ | ☐ |
| 8. If required is a consumptive use entered? | N/A | ☐ |
| Is the consumptive use correct? | N/A | ☐ |
| 9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, each household must file a separate claim. See Adjudication Memo # 4. | ☒ | ☐ |
| 10. Is (are) the place(s) of use entered? | ☒ | ☐ |
| 11. Is (are) the county(ies) entered? | ☒ | ☐ |
| 12. Is the ownership of p.u. checked? | ☒ | ☐ |
| 13. Are other water rights listed or "none" indicated? | ☒ | ☐ |
| 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 | ☐ |
| 15. Is the basis of the claim checked? | ☒ | ☐ |
| 16. Is the claim signed by the claimant, and is the signature appropriate? (If an individual is the claimant, has that individual signed the claim, or if an organization is the claimant, is the organization signature block complete?) | ☒ | ☐ |
| Has the claim been signed, sealed, and dated by a notary? | ☒ | ☐ |
| Was this claim filed on time, or was an extension granted? | ☒ | ☐ |
| Is the fee enclosed correct? | ☒ | ☐ |
| If this claim is based on an existing water right, has the identification number been entered? | N/A | ☐ |
| Should this claim be receipted and data entered? | ☒ | ☐ |

Claim checked by: [Signature]

Comments: _____