

RECEIVED

MAR 10 1997

Department of Water Resources

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: A35-02603

Date Received: / /

Receipt No: 0038353

Received By: _____

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

1. Name: LAMB WESTON INC
Address: 2975 LAMB WESTON RD
PO BOX 489
AMERICAN FALLS ID

208-226-2301

83211

2. Date of Priority: JUL 7, 1960

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
07S	30E	35	NW	NW	SE		POWER
			SW	NW	SE		POWER

5. Description of diverting works:
2 WELLS AND PUMPS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
INDUSTRIAL	01/01	12/31	3.340		

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

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:

POTATO PRODUCTS MANUFACTURING

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
07S	30E	35	NW	SE		INDUST	

A3502603



11. Place of use in counties: POWER

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

13. Other Water Rights Used:

A35-04127, A35-12670, PERMIT 35-08669

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 Organizations:

I do solemnly swear or affirm that I am Operations Manager of
Title
Lamb-Weston, Inc., American Falls, that I have signed the foregoing
Organization
document in the space below as Operations Manager of
Title
Lamb-Weston, Inc., American Falls and that the statements contained in the
Organization
foregoing document are true and correct.

Gale Schutte
Signature of Authorized Agent

Operations Manager, Lamb-Weston, Inc.
Title and Organization

March 7, 1997
Date

State of Idaho)
) SS.
County of Power)

Subscribed and sworn (or affirmed) before me this 7th day
of March 19 97

Robert G. Hoorn
Notary Public

Seal

Residing at Chubbuck, Idaho

My Commission Expires 04/17/98

17. Notice of Appearance:

Notice is hereby given that I, _____ will be
Print Name

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 _____

Address _____

Date _____