

**COPY**

RECEIVED  
JUL 11 2008  
DEPARTMENT OF  
JUDICIAL SERVICES

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

In Re SRBA ) A. Subcase: 27-12088  
)  
Case No. 39576 ) (Insert water right number  
) From the Objection Form)  
)  
)  
)  
)  
)  
\_\_\_\_\_ )

**STANDARD FORM 2  
RESPONSE TO OBJECTION**

Please **print or type** the following information:

**B. NAME AND ADDRESS OF PERSON RESPONDING**

Name: State of Idaho  
Address: 700 W. Jefferson, Room 210  
P.O. Box 44449  
Boise, Idaho 83711-4449  
Phone: Work: (208) 334-2400 Home: N/A

Name and Address of Attorney, if any:  
Attorney Name: LAWRENCE G. WASDEN  
Attorney General  
CLIVE J. STRONG  
Deputy Attorney General  
Chief, Natural Resources Division  
DAVID J. BARBER  
Deputy Attorney General  
Attorney Address: Office of the Attorney General  
700 W. Jefferson, Room 210  
P.O. Box 44449  
Boise, ID 83711-4449  
Attorney Phone No. (208) 334-2400  
Idaho State Bar # 2597

**C. NAME AND ADDRESS OF PERSON WHO FILED THE OBJECTION TO WHICH YOU ARE RESPONDING**

Name: Shoshone-Bannock Tribes  
Address: P.O. Box 306  
Fort Hall, ID 83203

Name & Address of Attorney, if any:  
Jeanette Wolfley  
202 N. Arthur  
Pocatello, ID 83204

**D.** I am responding to the objections to the following elements. (Please check the appropriate box(es)).

1. ☐ **Name and Address**
2. ☐ **Source**
3. ☒ **Quantity**
4. ☐ **Priority Date**
5. ☐ **Point(s) of Diversion**
6. ☐ **Instream Flow Description**
7. ☐ **Purpose(s) of Use**
8. ☐ **Period of Year**
9. ☐ **Place of Use**
11. **Recommendation**
  - ☐ This water right should not exist.
  - ☐ This water right was not recommended, but should be recommended with the elements described above.

E.

VERIFICATION (Must be Completed)

State of Idaho )  
                          ) ss.  
County of Ada)

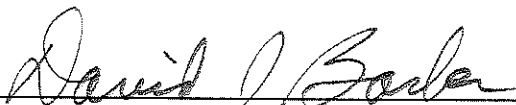
DAVID J. BARBER, Deputy Attorney General, being first duly sworn, upon oath, deposes and says:

That the State of Idaho is the party/claimant filing this response as defined by I.C. §§ 42-1401A(1) and (6), that I am a Deputy Attorney General authorized to represent the State of Idaho and that I have read this response, know its contents and that the statements are true to the best of my knowledge and belief.

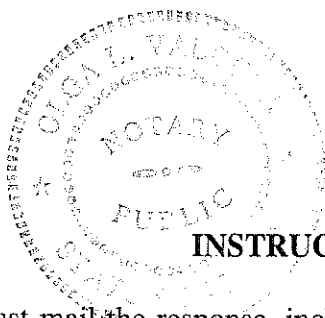
LAWRENCE G. WASDEN  
Attorney General

CLIVE J. STRONG  
Deputy Attorney General  
Chief, Natural Resources Division

DAVID J. BARBER  
Deputy Attorney General

  
By Attorney signing in representative capacity

Subscribed and sworn to before me on this 10<sup>th</sup> day of May, 2006  
(Insert Date)



  
Notary Public for IDAHO  
Residing at: BOISE, ID  
My commission expires: 2/8/2012

**INSTRUCTIONS FOR MAILING**

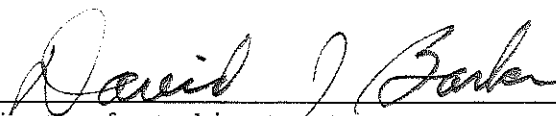
You must mail the response, including all attachments, to the Clerk of the Court. **FAX filings will not be accepted.** You must also send a copy to all the parties listed below in the Certificate of Mailing.

G.

**CERTIFICATE OF MAILING**

I certify that on this 10<sup>th</sup> day of May, 2006, I caused to be served the original and copies of this response to the following persons by the indicated methods:

1. Original to: Clerk of the District Court U. S. MAIL  
Snake River Basin Adjudication  
253 Third Avenue North  
P.O. Box 2707  
Twin Falls, Idaho 83303-2707
2. One copy to the claimant of the water right at the following addresses:  
  
Claimant Name: Valerie C. Duran U. S. MAIL  
Address: 8 W 100 N  
Blackfoot, ID 83221
3. One copy to the party who filed the objection at the following address:  
  
Name: Shoshone-Bannock Tribes U. S. MAIL  
Jeanette Wolfley  
Address: 202 N. Arthur  
Pocatello, ID 83204
4. Copies to: IDWR Document Depository STATEHOUSE  
PO Box 83720 MAIL  
Boise, ID 83720-0098  
  
United States Department of Justice U. S. MAIL  
Environment and Natural Resource Division  
550 West Fort Street, MSC 033  
Boise, Idaho 83724  
  
Chief of Natural Resource Division (not applicable)  
Office of the Attorney General  
State of Idaho  
P.O. Box 44449  
Boise, Idaho 83711-4449

  
\_\_\_\_\_  
Signature of party claimant or attorney