

COPY

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

RECEIVED

OCT 04 2006

DEPARTMENT OF
WATER RESOURCES

In Re SRBA)

A. Subcase Number: 01-4

(Insert water right number)

Case No. 39576)

STANDARD FORM 1
OBJECTION

Please fill in the following information:

B. NAME AND ADDRESS OF PERSON OBJECTING

Name: TWIN FALLS CANAL COMPANY

Address: P.O. BOX 326
TWIN FALLS, ID 83303

Daytime Phone: (208) 733-6731

Name and Address of Attorney, if any:

Attorney Name: JOHN A. ROSHOLT, ISB #1037
JOHN K. SIMPSON, ISB #4242
TRAVIS L. THOMPSON, ISB #6168
PAUL L. ARRINGTON, ISB #7198
BARKER ROSHOLT & SIMPSON, LLP
Attorney Address: P.O. BOX 485
TWIN FALLS, ID 83303

Attorney Phone No.: (208) 733-0700

C. CLAIMANT OF WATER RIGHT AS LISTED IN DIRECTOR'S REPORT

Name: TWIN FALLS CANAL COMPANY

Address: P.O. BOX 326
TWIN FALLS, ID 83303

D. I object to the following elements as recommended in the Director's Report. (Please check the appropriate box(es)).

1. ☐ **Name and Address**
Should be: ____
2. ☐ **Source**
Should be: ____
3. ☐ **Quantity**
Should be: ____
4. ☐ **Priority Date**
Should be: ____
5. ☐ **Point(s) of diversion**
Should be: ____
6. ☐ **Instream Flow Description**
Should be: ____
7. ☐ **Purpose(s) of Use**
Should be: ____
8. ☐ **Period of Year**
Should be: ____
9. ☒ **Place of Use**
Should be: ____

11. **I object because:**

- ☐ This water right should not exist.
- ☐ This water right was not recommended, but should be recommended with the elements described above.

E. REASONS SUPPORTING OBJECTION(S): Objection is necessary to correct the project boundary and the total number of irrigated acres.

F.

VERIFICATION (Must be Completed)

State of Idaho)
) ss.
County of Twin Falls)

TRAVIS L. THOMPSON, duly sworn, upon oath, deposes and says:

That I am the party/claimant filing this objection, as defined by I.C. §§ 42-1401A(1) and (6) or that I am the attorney for the party/claimant objecting and that I have read this objection, know its contents and believe that the statements are true to the best of my knowledge.

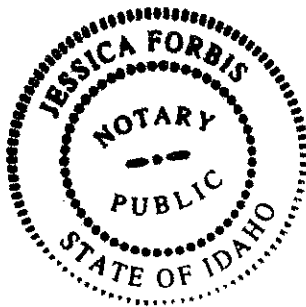
(Signature of person filing objection)

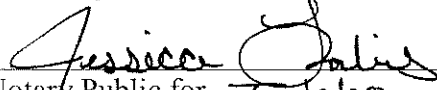


(Attorney signing in representative capacity)

Subscribed and sworn to before me on:

October 3, 2006




Notary Public for Idaho
Residing at: Twin Falls
My Commission Expires: 4/3/12

INSTRUCTIONS FOR MAILING

You must mail the objection 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 October 3rd, 2006, I mailed the original and copies of this objection, including all attachments, to the following persons:

1. Original to:

Clerk of the District court
Snake River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

2. One copy to the claimant of the water right at the following address:

Name: TWIN FALLS CANAL COMPANY
Address: P.O. BOX 326
TWIN FALLS, ID 83303

3. Copies to:

IDWR Document Depository ✓
PO Box 83720
Boise, ID 83720-0098

United States Department of Justice
Environment & Nat'l Resources Div
550 W Fort Street, MSC 033
Boise, ID 83724

Chief, Natural Resources Division
Office of Attorney General
PO Box 44449
Boise, ID 83711-4449



Travis L. Thompson