



STATE OF ID
OFFICE OF THE ATTORNEY
LAWRENCE G. WA

April 2, 2007

Scott P. Eskelson
Martin & Eskelson PLLC
425 S Holmes Ave
PO Box 3189
Idaho Falls, ID 83403-3189

Scott Eskelson called
3-24-07 and said
to just recommend .02
for domestic and be
done with it.

Place of use should
be ~~SESE~~ SESE.

RE: Subcase No. 21-10753

Dear Mr. Eskelson:

Enclosed please find a document entitled "Standard Form 5 – Stipulated Elements of A Water Right" (commonly referred to as SF 5) which has a revised recommendation attached. Pursuant to the objection, IDWR has revised its recommendation to this water right to correct the quantity and place of use elements.

Please review the new recommendation, which is attached to the SF 5. If it meets with your approval, please obtain the appropriate signatures, date the first page of the original and **initial the changes** on the page entitled "Idaho Department of Water Resources Recommended Water Rights Acquired Under State Law". After all have signed and initialed the original SF 5, you may either return it to me or file it directly with the SRBA District Court. The court set an initial hearing for April 25th. It is our desire to file this document prior to that date so that this hearing may be vacated.

If you have any questions regarding the enclosed documents, please do not hesitate to call me at: 287-4814. Thank you for your cooperation.

Sincerely,

Becky J. Harvey
Paralegal

/bh

Enclosures

ccs Cheryl Manginelli, Trustee
Trent Galbraith, IDWR Water Agent via email

COPY

RECEIVED

MAY 03 2006

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 21-10753
(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: Cheryl Manginelli - trustee of the Theone
Address: Mangin Testamentary Trust and the Madeline Mangin
312 Pinon Dr. Idaho Falls, ID 83401
Daytime Phone: 208-524-0534

Name & Address of Attorney, if any:

Scott Eskelson
405 So. Holmes Ave.
Idaho Falls, ID 83401

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

Name: Theone and Madeline Mangin - now deceased
Address: _____

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: 1.04 cfs
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: NESESE, SEC. 25 T9N R. 43E
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): 1.04 cfs 15

standard permitted amount for domestic use
from well.
well