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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 SRBA)
) A. Subcase 47-2337
)
Case No. 39576)
)
) STANDARD FORM 2
) RESPONSE TO OBJECTION
)
_____)

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

B. NAME AND ADDRESS OF PERSON RESPONDING

Name: William S. Root
Circle S West, LLC
Address: 1115 E. 4400 N
Buhl, Idaho 83316
Daytime Phone: (208) 543-8693

Name & Address of Attorney, if any:
Thomas B. Dominick, Esq.
Dominick Law Offices, PLLC
1501 Tyrell Lane
Boise, Idaho 83706

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

Name: Twin Falls Canal Company
Address: P.O. Box 326
Twin Falls, Idaho 83303-0326

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

1. ☐ Name and Address
2. ☒ Source. Objection to this licensed right is barred by principles of failure to exhaust adm. remedies, collateral estoppel, res judicata, lack of necessity, laches, etc. This issue should have been raised at the adm. level. No legal challenge to claim at this time.
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.

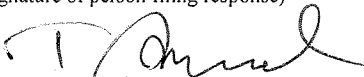
E. VERIFICATION (Must be Completed)

State of Idaho)
)ss.
County of Ada)

Thomas B. Dominick, duly sworn, upon oath, deposes and says:

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

(Signature of person filing response)



(Attorney signing in representative capacity)

on before me this _____ day of _____, 20____
 at _____, _____, State of Idaho.
 My commission expires _____, 20____.

 Notary Public
 State of Idaho
 My Comm. Expires _____, 20____

 Notary Public
 State of Idaho

Notary Public for: Idaho
Residing at: Wm. Home
My Commission Expires: 11-20-09

CERTIFICATE OF MAILING

Dec 4

- Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
P.O. Box 2707
Twin Falls, Idaho 83303-2707

- Name: William S. Root
Circle S West, LLC
Address: 1115 E. 4400 N.
Buhl, Idaho 83316

- Name: Twin Falls Canal Company
C/O Paul Arrington, Esq.
Address: P.O. Box 485
Twin Falls, Idaho 83303-0485

- United States Department of Justice
Environment & Natural Resource
Division
550 West Fort Street, MSC 033
Boise, Idaho 83724

Chief, Natural Resources Division
Office of the Attorney General
State of Idaho
P.O. Box 44449
Boise, Idaho 83711-4449

Idaho Groundwater App.
C/O Randall Budge, Esq.
P.O. Box 2624
Boise, Idaho 83701-0294



Your signature or signature of attorney mailing on your behalf.