

08/20/2004

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: September 30, 2004

Water right number: 85-4194

TWIN CITY FOODS INC

PO BOX 647

LEWISTON ID 83501

Telephone Number: (208)743-5568

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

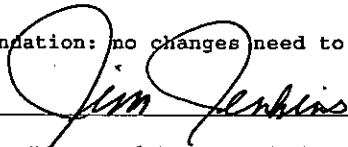
2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

XX I AGREE with this proposed recommendation: no changes need to be made.

DATE: August 30, 2004

SIGNATURE:



Please print your name: Jim Jenkins Division Manager

IDWR State Office, P.O. Box 83720, Boise, ID 83707-9815

09/10/2004

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 85-4194

NAME AND ADDRESS: TWIN CITY FOODS INC
PO BOX 647
LEWISTON ID 83501

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 6.950 CFS

PRIORITY DATE: 09/25/1952

POINT OF DIVERSION:

T36N R06W S36 SWNE Lot 2 Within NEZ PERCE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE
COMMERCIAL

PERIOD OF USE
1/01 12/31

QUANTITY
6.950 CFS

PLACE OF USE: COMMERCIAL Within NEZ PERCE County

T36N R06W S36 Lot 2 NWNE

T36N R06W S36 Lot 2 SWNE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

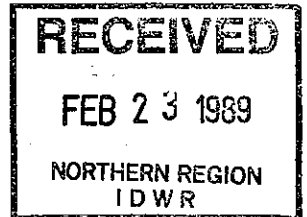
EXPLANATORY MATERIAL: Beneficial Use

**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 A85-04194
Date Received _____
Receipt Number N-2356

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



Please type or print clearly

1. Name of Claimant (s) TWIN CITY FOODS, INC. Phone (208) 743-5568
Mailing Address P.O. BOX 647 LEWISTON, IDAHO Zip 83501
2. Date of Priority (Only one (1) per claim) SEPTEMBER 25, 1952
3. Source of water supply (a) GROUND WATER
which is tributary to (b) _____
4. a. Location of existing point of diversion is: Township 36N Range 6W Section 36,
NW 1/4 of SW 1/4 of NE 1/4, Govt. Lot, _____ B.M., County of NEZ PERCE
Additional points of diversion if any: _____
b. If instream flow, beginning point of claimed instream flow is:
Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,
Govt. Lot _____ B.M., County of _____
ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____
_____ 1/4, Govt. Lot _____ B.M., County of _____
5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc),
including the dates of any changes or enlargements in use, the dimensions of the diversion works as
constructed and as enlarged and the depth of each well. WELL: Drilled in 1952 (See Attachment A)
Well capacity 3000 gpm. Pump: 200 H.P., electric with a seven stage turbine pump
at 300 ft.

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APR 25 1993

6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For INDUSTRIAL purposes from JAN 1 to DEC 31 amount 6.95 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) _____ (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Industrial, Vegetable Processing (Green Peas & Lima Beans)

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
36N	6W	36		I	I														

Total number of acres irrigated _____

11. In which county (ies) are lands listed above as place of use located? Nez Perce

12. Do you own the property listed above as place of use? Yes _____ No See Remarks

If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

or None ()

14. Remarks:

Well: Location Burlington Northern Railroad leased land. Contract No. CP 1709.

Address: Director Accounts Receivable and Contracts, Burlington Northern Railroad Company, P.O. Box 64952 St. Paul, MN. 55164 Phone# (612) 298-7465

USE: Twin City Foods, Inc. Deeded Land and Burlington Northern Leased Land

(See Attachment B)

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APR 25 1993

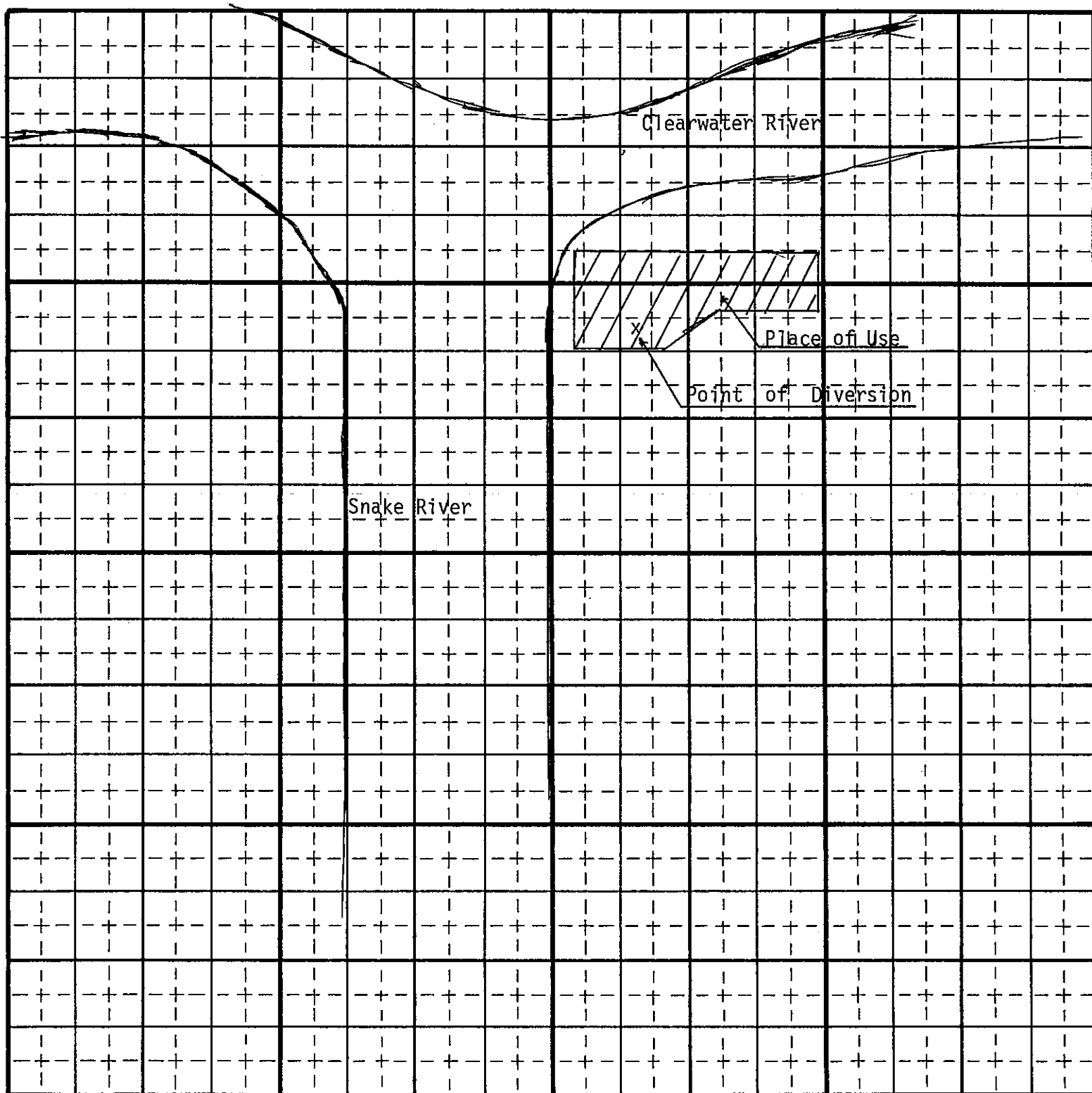
Last Name TWIN CITY FOODS Ident No. 485-04194

Copies: White -State, Yellow-Claimant

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile

T. 36N R. 6W Sec. 36



MICROFILME

Last Name TWIN CITY FOODS

Ident No. 185-0414

Copies: White-State, Yellow-Claimed APR 25 1993

15. Basis of Claim (check one) Beneficial Use X Posted Notice _____ License _____ Permit _____

Decree _____

If applicable provide IDWR Water Right Number 85-04194

Court _____ Case Number _____ Decree Date _____

Plaintiff vs Defendant _____

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 2

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date _____

_____ Date _____

For Organizations: I do solemnly swear or affirm that I am THE DIVISION MANAGER

Title

of TWIN CITY FOODS, INC., LEWISTON DIVISION, that I have signed the foregoing

Organization

document in the space below as DIVISION MANAGER of TWIN CITY FOODS, INC., LEWISTON DIV.

Title

Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent *Earl E. Lundberg*

Title and Organization DIVISION MANAGER, TWIN CITY FOODS, INC. Date 2/17/89

LEWISTON DIVISION

State of Idaho/or 1)
County of NEZ PERCE) SS.

Subscribed and sworn (or affirmed) before me this 17th day of February 19 89

SEAL

Notary Public *Mary K. Parker*

Residing at *Lewiston*

My Commission Expires *11-30-93*

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, _____ will be 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 _____

Last Name TWIN CITY FOODS Ident. Number 85-04194

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APR 25 1993
Copies Will Be Made Available to Claimant

CLAIMANT'S NAME Union City Foods
DATE RECEIVED 2-23-89 CK # _____

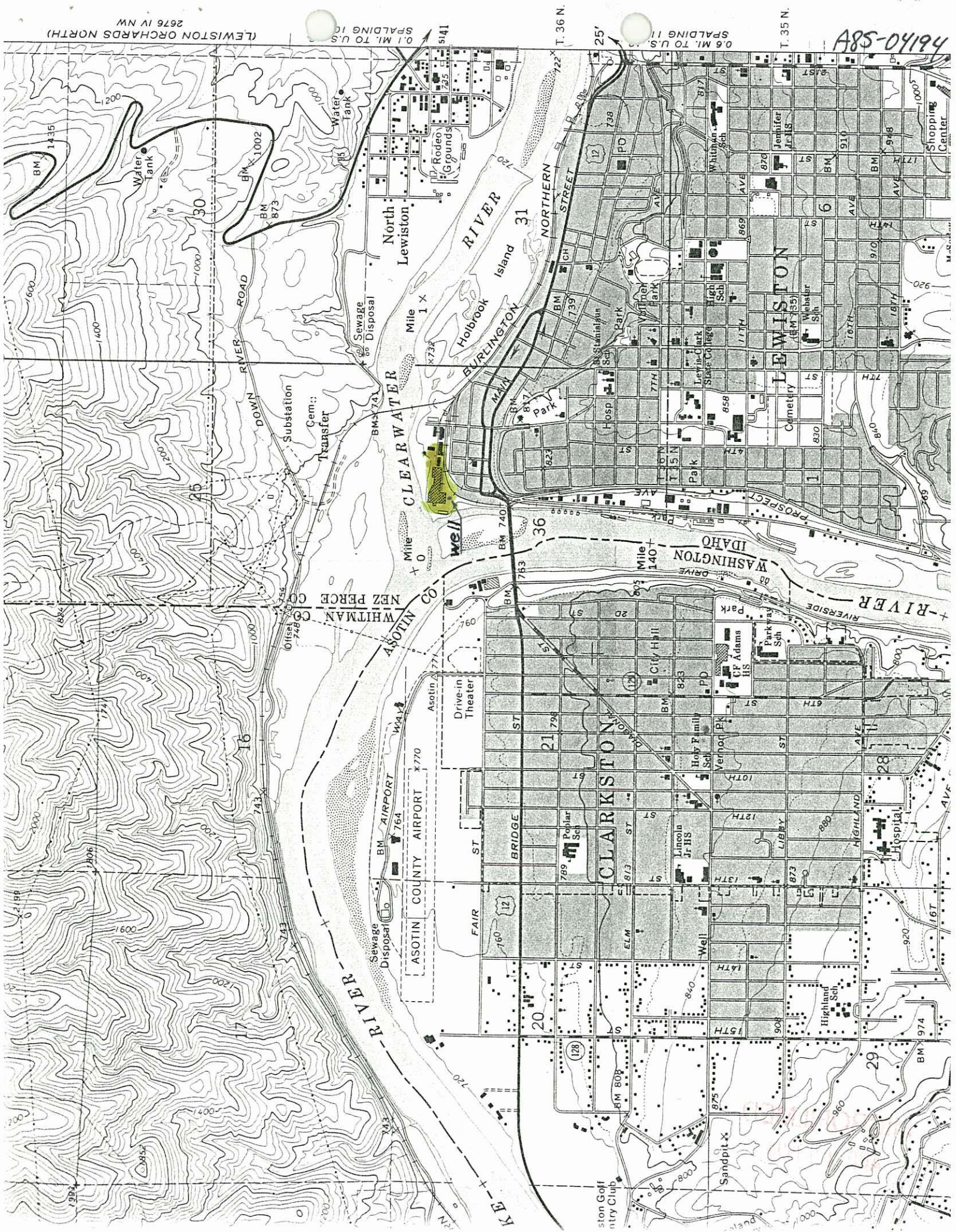
CLAIM IDENT. NO. A85-04194
AMOUNT \$ _____

- | | YES | NO |
|--|-------------------------------------|-------------------------------------|
| 1. Is the name and address complete with zip code? | ☒ | ☐ |
| 2. Is priority date entered? | ☒ | ☐ |
| Is the water use exempt from the Permit requirements, or if it is not exempt, has a Permit been approved or a License issued?
A Permit is required: (1) for groundwater developed after March 25, 1963 (except single family domestic and stockwater wells using less than 13,000 gpd), or (2) for surface water developed after May 20, 1971 (except for instream stockwater). Use care if claim is returned. Refer to Adjudication Memos # 1 (Adj. Claims/Applications) and # 9 (Rejection of Claims). Explain in Comments. | | |
| 3. (a) Is a source entered? | ☒ | ☐ |
| (b) Is a tributary to entered? (if required) | ☒ | ☐ |
| 4. Is the legal description of the p.d. complete? | ☒ | ☐ |
| 5. Is there a description of the diverting works? | ☒ | ☐ |
| 6. Are the water uses appropriate for the form? The short form limited domestic and stockwater. Instream stockwater must use long form. | ☒ | ☐ |
| Is the period of use included? | ☒ | ☐ |
| Is a quantity claimed for each use? | ☒ | ☐ |
| 7. Is a total quantity claimed entered? | ☒ | ☐ |
| 8. Is the consumptive use correct? | ☒ | ☐ |
| If required is a consumptive use entered? | ☐ | ☐ |
| 9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, each household must file a separate claim. | ☐ | ☐ |
| 10. Is (are) the place(s) of use entered? | ☒ | ☐ |
| 11. Is (are) the county(ies) entered? | ☒ | ☐ |
| 12. Is the ownership of p.u. checked? | ☒ | ☐ |
| 13. Are other water rights listed or "none" checked? | ☒ | ☐ |
| 14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) | ☐ | ☒ |
| 15. Is the basis of the claim checked? | ☒ | ☐ |
| 16. Is the claim signed by the claimant?
Is the signature appropriate? (If an individual is the claimant, has that individual signed the claim, or if an organization is the claimant, is the organization signature block complete?) | ☒ | ☐ |
| Has the claim been signed, sealed, and dated by a notary? | ☒ | ☐ |
| Is the fee enclosed correct? | ☒ | ☐ |
| If this claim is based on an existing water right, has the identification number been entered? | ☒ | ☐ |
| Should this claim be receipted and data entered? | ☒ | ☐ |

Claim checked by OK 7-26

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APR 25 1989

Comments: check consumptive use fees



A85-0494

(LEWISTON ORCHARDS NORTH)
2676 IV NW
SPALDING CO
0.1 MI. TO U.S.

0.6 MI. TO U.S.
SPALDING CO
T. 35 N.

T. 36 N.

T. 35 N.

SNOW CROP LEWISTON PLANT WELL NO. 1 FORMATION LOG

<u>Static Water Level</u>	<u>From (Ft.)</u>	<u>To (Ft.)</u>	<u>Thickness (Ft.)</u>	<u>Formation</u>
	0	8	8	Sand, gravel and top soil
	8	37	20	River gravel and negger head boulders
	37	55	18	Gravel with some sand
16	55	112	57	Gravel and seams of broken basalt
"	112	119	7	Sandy clays and broken basalt
"	119	152	33	Yellow clay, sand, boulders, some gravel
"	152	163	11	At 152' top of first consolidated basalt rock dark and hard.
"	163	165	2	Broken basalt
"	165	173	8	Dark medium basalt
"	173	182	9	Hard gray basalt
"	182	194	12	Dark basalt. Water level apparently fluctuates with river rise
"	194	221	27	Extreme hard gray basalt. Bail test drawdown water to 150'
"	221	252	31	Hard black basalt w/intermittent crevices
~~21~~	252	268	16	Solid black basalt
21	268	281	13	Broken brown med. basalt
"	281	340	59	Hard black and gray basalt
"	340	355	15	Broken brown basalt
24	355	410	55	Hard gray basalt
"	410	415	5	" " " badly creviced
25	415	449	34	Medium black and gray basalt
"	449	457	6	Gray basalt, creviced
"	457	462	5	Gray basalt
"	462	482	22	Fractured basalt, caving
"	482	491	9	Dark gray basalt. Bail tested 210 G. P. M. for one hour static water level 25' drawdown 3'. Decided to go on.
"	491	535	44	Very hard black and gray basalt
"	535	552	17	Broken red basalt
"	552	627	75	Gray and black basalt, hard
"	627	630	3	Broken black and gray basalt.

Grout sealed surface water between casings and pump tested. (See pump test report)

Casing:

24" Seated @ 58'

20" Seated @ 152'

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APR 25 1993

AR5-74194

485-04194



TWIN CITY FOODS, INC., STANWOOD, WASHINGTON

VENDOR	DATE	INVOICE NO.	GROSS AMOUNT	DISCOUNT	NET AMOUNT	REMARKS
414832	2/17/89	2/17/89	174.00	.00	174.00	04-7525-86-400
		--TOTAL--	174.00	.00	174.00	VOUCHER #10003052

RECEIVED
FEB 23 1989
NORTHERN REGION
IDWR

APR 25 1993
MICROFILMED

185-04194

PLEASE DETACH BEFORE DEPOSITING

TWIN CITY FOODS, INC., STANWOOD, WASHINGTON

VENDOR	DATE	INVOICE NO.	GROSS AMOUNT	DISCOUNT	NET AMOUNT	REMARKS
41483	1/19/89	1-19-89	545.00	.00	545.00	VOUCHER # 09 53836
		--TOTAL--	545.00	.00	545.00	

RECEIVED
FEB 23 1989
NORTHERN REGION
IDWR

APR 25 1993
MICROFILMED

185-04194

PLEASE DETACH BEFORE DEPOSITING

Twin City Foods, Inc.



PACKERS OF QUALITY FROZEN VEGETABLES

(206) 629-2111 • FAX (206) 629-3533 • TWX 910-449-2908 • EASYLINK 62139590 • P.O. BOX 699, STANWOOD, WASHINGTON 98292

21 FEBRUARY 1989
Lewiston, Idaho 83501

Idaho Department of Water Resources
Northern Region
1910 Northwest Blvd.
Suite 210
Coeur D' Alene, Idaho 83814



Dear Sir or Madam:

Enclosed please find our application of Notice of Claim to a Water Right acquired under state law.

Attached are supporting documents and 2 checks in the amount of \$545.00 and \$174.00 to cover our application for 6.95 (cfs).
Thank you.

Sincerely,

Earl E. Sundberg
Division Manager
Lewiston Division

Twin City Foods, Inc.
P.O. Box 647
Lewiston, Idaho 83501

Encls:

MICROFILMED

APR 25 1993

A85-04194

Located In

Stanwood, Arlington, Ellensburg, Kennewick, Prosser, Washington • Lewiston, Idaho • Lake Odessa, Michigan