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DEPARTMENT OF
WATER RESOURCES

SRBA Form No.42-1409-1 (Internet 2/09)

DISTRICT COURT-SRBA
Fifth Judicial District
County of Twin Falls - State of Idaho

MAY - 3 2011

By _____

Clerk

Deputy Clerk

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 63-33503

Date Received: _____

Receipt No: _____

Received By: _____

NOTICE OF CLAIM
TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) G. O. Investments, LLC Phone (208) 482-7397

Mailing Address 24034 Batt Corner Road, Parma, Idaho ZIP 83660

2. Date of Priority (Only one (1) per claim) March 14, 1944 City Parma State Idaho
Month Day Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other () (a) Baldridge and Meadows Drain
which is tributary to (b) Bolse River

4. a. Location of Point of Diversion Is: Township 5N, Range 5W, Section 27
NW, 1/4 of NW, 1/4 Govt. Lot 4, BM., County of Canyon

Parcel (PIN) no. _____

Additional points of diversion If any: _____

If available, GPS Coordinates _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., County of _____

ending point is: Township _____, Range _____, Section _____, _____, 1/4 of _____, 1/4

Govt. Lot _____, BM., 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. _____

6. Water is claimed for the following purposes:

(both dates are Inclusive MM-DD)

(cfs)

(acre feet)

For Irrigation purposes from 3/1 to 11/15 amount 0.60 or

For purposes from to amount or

For purposes from to amount or

For purposes from to amount or

7. Total quantity claimed (a) 0.60 (cfs) and/or (b) (acre feet)

8. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock, Etc.)

9. 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.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
5N	5W	21						L10											
							1												1
		22											L 5						
													11						11

Parcel (PIN) no(s).

Total number of acres irrigated 12

10. In which county (ies) are lands listed above as place of use located? Canyon

11. Do you own the property listed above as place of use? Yes (✓) No ()

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

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

or None (✓)

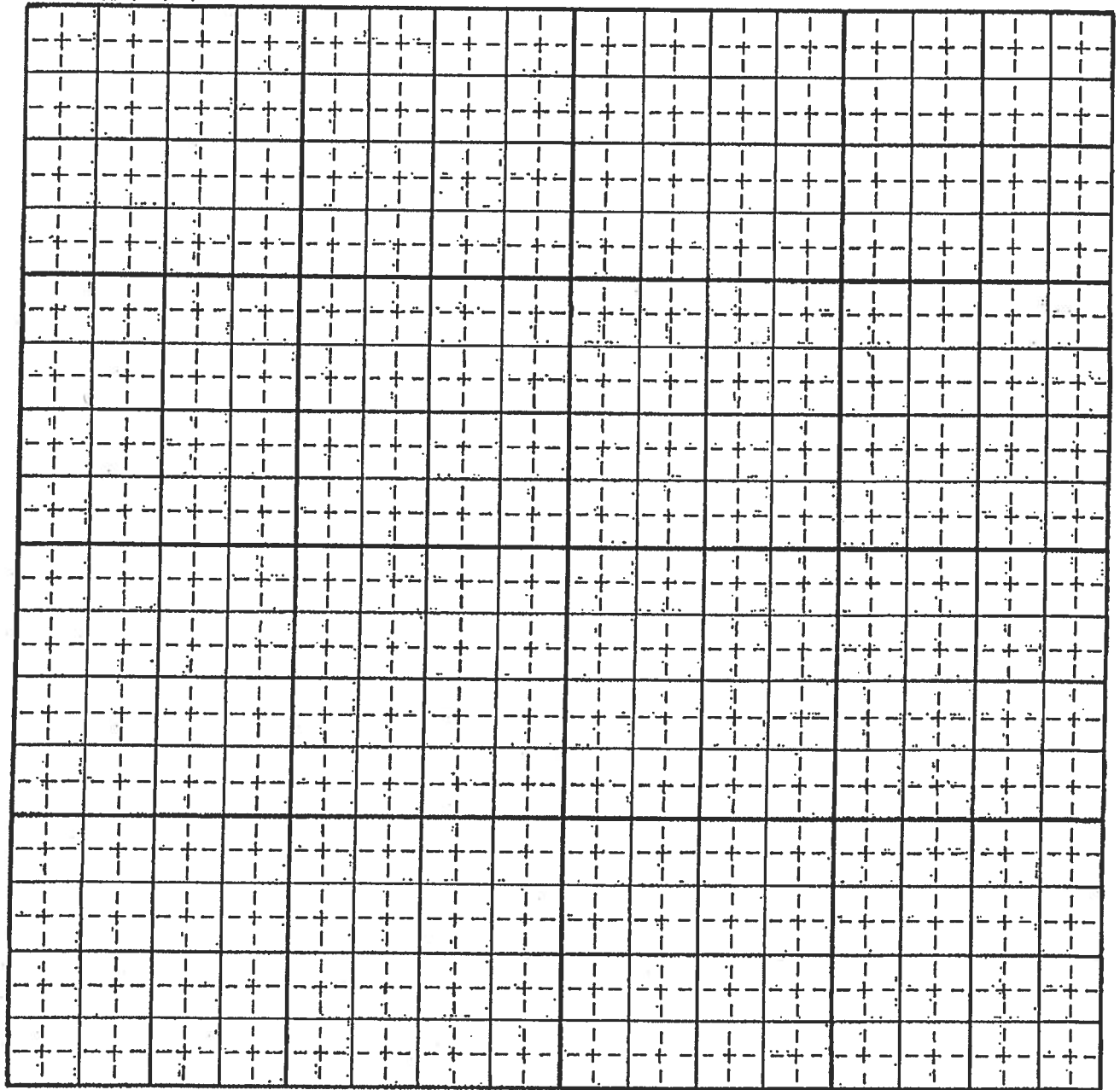
13. Remarks:

Last Name G. O. Investments, LLC

Identification No. 63-33503

Map of Project: Attach aerial photograph or topographic map showing clearly the point of diversion, place of use, section number, township, and range number, unless unavailable. Otherwise sketch the elements above on the grid below.

Scale: 2 Inches equals 1 mile



Last Name _____ Identification No. 63-33503

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice (☐) License (☐) Permit (☐) Decree (☐)

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices 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: 1 Aerial Photo

For Individuals: I/We do solemnly swear or affirm under penalty of perjury 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 under penalty of perjury that I am

Manager _____ of G. O. Investments, LLC _____,
Title Organization

that I have signed the foregoing document in the space below as

Manager _____ of G. O. Investments, LLC _____,
Title Organization

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

Signature of Authorized Agent Ray C. Bendorf Date 4-29-11

Title and Organization Manager, G.O. Investments, LLC

16. Notice of Appearance:

Notice is hereby given that I, Dana L. Hofstetter, Hofstetter Law Office, LLC, will be acting as attorney at law of 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 Dana Hofstetter Date 4/29/11

Address Hofstetter Law Office, LLC

608 West Franklin Street, Boise, ID 83702

Last Name _____ Identification No. 63-33503