

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: SEP-10-1998
PAGE: A-16

RIGHTS FROM: SOURCE: GROUNDWATER

RIGHT NUMBER: 47-14587

NAME & ADDRESS: DESERT MOUNTAIN LLC
936 GRANDVIEW DR
TWIN FALLS ID 83301

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 05/31/1965

POINT OF DIVERSION: T10S R17E S18 NWNENE Within TWIN FALLS County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOUSE	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within TWIN FALLS County
T10S R17E S18 NENE

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

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

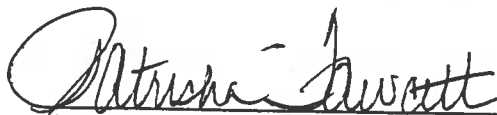
EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
10S17E180040

Page 1

CERTIFICATE OF MAILING

I certify that on 9-15, 1998, I mailed the original and copies of this form to the following persons, postage prepaid and addressed as follows:

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:
Claimant/Seller for Substitution of Party or attorney of record:
Norman Lancaster
936 Grandview Dr
Twin Falls ID 83301
3. One Copy to:
Claimant/Purchaser for Substitution of Party or attorney of record:
Desert Mountain LLC
936 Grandview Dr
Twin Falls ID3301
4. One Copy to:
Each party in the subcase or attorney of record:
5. One Copy to:
Chief Natural Resources Division
Office of the Attorney General
PO Box 44449
Boise ID 83711-4449
6. One Copy to:
United States Dept Of Justice
Environment & Natural Resource Div
550 West Fort Street MSC 033
Boise ID 83724



Signature of person or attorney mailing the form



State of Idaho

DEPARTMENT OF WATER RESOURCES

1341 Fillmore Street, Suite 200, Twin Falls, ID 83301-3380

Phone: (208) 736-3033 FAX: (208) 736-3037

September 15, 1998

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

DESERT MOUNTAIN LLC
936 GRANDVIEW DR
TWIN FALLS ID 83301

RE: SRBA Claim(s) 47-14587

Dear Claimant:

Please find the enclosed copy of the Notice of Completed Administrative Proceeding which the department has filed with the SRBA Court regarding the above referenced claims. You have received this notice pursuant to SRBA Court Administrative Order 11 requiring IDWR to report to the court and interested parties any pending changes to adjudication claims in basins for which a Director's Report has been filed with the court.

Please contact this office if you have any questions about the notice or the administrative process.

Sincerely,

Trish Fawcett
Technical Records Specialist

/tf

STATE OF IDAHO
IDAHO DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

RECEIVED
AUG 31 1998

Department of Water Resources
Southern Region

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

1. Water Right No(s): _____
Adjudication Claim No(s): ~~47-14585, 47-14586, 47-14587~~

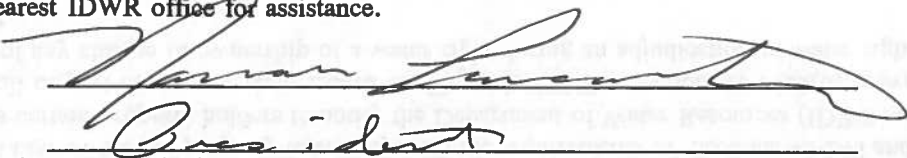
2. The following REQUIRED information must be submitted with this form:
 - A. A copy of the most recent DEED, TITLE POLICY, CONTRACT OF SALE or other legal document indicating your ownership of the property and water rights or claims in question, WITH ATTACHED LEGAL DESCRIPTION.
 - AND
 - B. PLAT OF PROPERTY or SURVEY MAP for parcel of ten acres or less. (These are usually attached to your deed or on file with the county.)
 - OR
 - C. For water rights or adjudication claims involving ten or more irrigated acres, a USDA Farm Service Agency AERIAL PHOTO with irrigated acres outlined and point(s) of diversion clearly marked.

3. Name and Address of Former Owner/Claimant Norman Lancaster
Box 8748 Grandview DR

4. New Owner/Claimant(s) Desert Mountain LLC
Name Connector (Check one): ☒ and, ☐ or, ☐ and/or
New Mailing Address 936 Grandview DR
City, State and ZIP Code Twin Falls, ID. 83301
New Telephone Number (208) 734-6233

5. Date you acquired the property _____

6. If you have acquired only a portion of the former owner's property, IDWR may need to split the water right(s) or adjudication claim(s). If this applies, describe in detail your portion of each water right or adjudication claim in the spaces below. If necessary, attach additional pages.
 Number of acres you irrigate _____ Number and type of stock _____
 Diversion rate in CFS _____ Number of homes _____ Other uses _____
 If a water right or adjudication claim is being split and you are not sure how to identify your portion of the original right or claim, please contact the nearest IDWR office for assistance.

7. Signature of New Owner or Claimant(s) 
(Corporations or other organizations must submit a list of directors and/or officers demonstrating authority to sign form.)

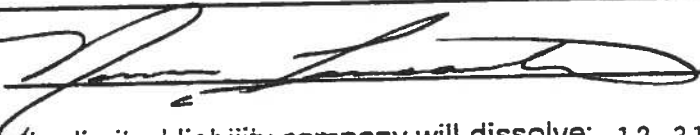
8. For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims..

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

To the Secretary of State of Idaho,
Statehouse, Boise, Idaho 83720

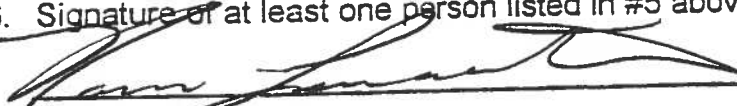


JUL 24 10 49 AM
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is: Desert Mountain, L.L.C.
2. The address of the initial registered office is: 936 Grand View Drive,
(not a PO Box)
Twin Falls, Idaho 83301 and the name of the initial registered agent at that address is: Norm Lancaster
Signature of registered agent: 
3. The latest date certain on which the limited liability company will dissolve: 12-31-2095
4. Is management of the limited liability company vested in a manager or managers?
☒ Yes ☐ No (check appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

<u>Name:</u>	<u>Address:</u>
<u>Norm Lancaster</u>	<u>936 Grand View Drive</u>
<u></u>	<u>Twin Falls, ID 83301</u>
<u></u>	<u></u>
<u></u>	<u></u>

6. Signature of at least one person listed in #5 above:


Norm Lancaster

Secretary of State use only

IDAHO SECRETARY OF STATE

7/24/95 9:00:00 AM
Customer # 2053
IVC960004193 16384

CORPORATION ORGANIZATION LLC

AJ5855NP
8363

IDAHO DEPARTMENT OF WATER RESOURCES
INDIVIDUAL LISTING FROM DIRECTOR'S REPORT
OF WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: August 7, 1998
PAGE: 1

RIGHT NUMBER: 47-14587

NAME AND ADDRESS: NORMAN LANCASTER
BOX 8748
GRANDVIEW DR
TWIN FALLS ID 83301

DESERT MOUNTAIN, LLC.
(208) 733-7622
936 GRANDVIEW DR
TWIN FALLS, IDAHO 83301

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY-DATE: 05/31/1965

POINT OF DIVERSION T10S R17E S18 NWNENE Within TWIN FALLS County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOUSE	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within TWIN FALLS County
T10S R17E S18 NENE

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

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
10S17E180040

GERALD R. BOWDEN, ASSESSOR
TWIN FALLS COUNTY
P.O. BOX 265
TWIN FALLS, ID. 83303-0265

IMPORTANT NOTICE-PI

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
TWIN FALLS, ID. 83301
PERMIT NO 5

RETURN SERVICE REQUESTED

TAX CODE 43-00

CATEGORY DESCRIPTION

LOTS/ACRES

1.840 AC

1.840

1998
TAXPAYER'S
VALUATION

ASSESSMENT NOTICE
TAXES ARE BASED ON THE VALUATION
LISTED ON THIS STATEMENT

IF THERE ARE ANY QUESTIONS
REGARDING THIS STATEMENT
NOTIFY THE ASSESSOR'S OFFICE BEFORE

JUNE 22, 1998

See the reverse side for further references
KEEP THIS COPY FOR YOUR RECORDS

PROPERTY ADDRESS
PARCEL NUMBER

ADDISON AVE W
RP 10S17E180040 A Mail To:

33301

SEC 18 T 10 R 17
THAT PT OF N1/2 NE NE N OF HWY
W OF DEADMAN'S GULCH, EXC
TAX #1371

DESERT MOUNTAIN LLC
936 GRANDVIEW DR
TWIN FALLS ID 83301

1100 Addison

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: SEP-2-1997
PAGE: A-3629

RIGHT NUMBER: 47-14587

NAME & ADDRESS: NORMAN LANCASTER
BOX 8748
GRANDVIEW DR
TWIN FALLS ID 83301

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 05/31/1965

POINT OF DIVERSION: T10S R17E S18 NWNENE Within TWIN FALLS County

PURPOSE AND

PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOUSE	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within TWIN FALLS County
T10S R17E S18 NENE

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THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
10S17E180040

Claim proofread by: RM

Date: 9-10-97

D
4-29-98

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: A47-14587

Date Received: 1/24/1989

Receipt No: S006073

Received By: [Signature]

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: NORMAN LANCASTER
Address: BOX 8748
GRANDVIEW DR.
TWIN FALLS, ID

208-734-6233

83301

2. Date of Priority: MAY 31, 1965

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
10S	17E	18	NW	NE	NE		TWIN FALLS

5. Description of diverting works:
WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or)

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
10S	17E	18	NE	NE		DOMEST	

11. Place of use in counties: TWIN FALLS

A47-14587

Page 1

Date: 01/24/89

MICROFILMED

MAR 16 1993

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE

14. Remarks:
OLD PRESCOTT PROPERTY N. OF HWY 30.

15. Basis of Claim: BENEFICIAL USE

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: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

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 A47-14587
Date Received Dec 9 1988
Receipt Number 8006073 *2cc*

**NOTICE OF CLAIM
TO A
WATER RIGHT**

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day. Filing fee \$25

Please type or print clearly

1. Name of Claimant (s) Norman Lancaster Phone 808 734 6233
Mailing Address Box 8748 Grandview DR. Twin Falls, ID Zip 83301
2. Date of Priority (Only one (1) per claim) MAY 31 1965
3. Source of water supply (a) under ground
which is tributary to (b) _____
4. Location of point of diversion is: Township 10S Range 17E
Section 18 , NW 1/4 of NE 1/4 of NE 1/4 , Govt. Lot _____ , B.M.,
County of Twin Falls
- Additional points of diversion if any: _____
5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate 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 - Drilling Date
4-46 Depth 60 ft Drum P.
6. Water is claimed for the following: (Limited to Domestic and/or Stockwater only. See Instructions)
(Both dates are inclusive) (cfs)
For Domestic purposes from 1-1 to 12-31 amount .040
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed .040 (cfs)
8. Total consumptive use claimed is de minimus
9. Non-irrigation uses. Describe fully. (Domestic: give number of households served; Stockwater: Type and number of livestock) Domestic 0/1

**MICROFILMED
MAR 16 1993**

10. Place a "D" for domestic and "S" for stockwater use in the corresponding place of use below.

FWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4			
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4
105	17E	18	D															

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

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

14. Remarks: Old Prescott Property N. of Hwy 30.

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

If applicable provide IDWR Water Right Number _____
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 X
wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments 0

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

Signature of Claimant (s) [Signature] Date 12-6-88
[Signature] Date 12-9-88

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____, that I have signed the foregoing
document in the space below as _____ Organization _____
Title _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Title and Organization _____ Date _____

State of Idaho/or Idaho)
County of Twin Falls) SS.

Subscribed and sworn (or affirmed) before me this 6th day of December 19 88

SEAL

Notary Public [Signature]

Residing at Twin Falls, Idaho

My Commission Expires 9-30-93

Last Name _____ Ident No. _____

COPIES: White - State, Yellow - Claimant

MAR 16 1993