

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED
APR 13 2020
Department of Water Resources
Eastern Region

NOTICE OF EXCEPTIONS

This form may be used to file a protest with the department under sections 42-108B, 42-203A, 42-203C, 42-211, and 42-222, Idaho Code. The department will also accept a timely protest not completed on this form if it contains the same information.

1. Matter being protested Application for Permit # 15-7468 in the name of Malad Forest Users Association
2. Name of protestant City of Malad City, Idaho (59 Bannock Street, Malad City, Idaho 83252)
3. Protestant's Representative for service (If different than protestant)
Dustin W. Smith, Malad City Attorney
4. Service mailing address 765 S. Hillcrest Loop, Malad City, Idaho 83252
5. Service telephone no. (208) 766-3414 Email Address: maladcityattorney@gmail.com
6. Basis of protest (including statement of facts and law upon which the protest is based)

Malad City has prior existing water rights #15-4165 at the same point of diversion (Spring SENWNE, Sec. 23, Twp 14S, Rge 36E, BM, Oneida County, with beneficial use (irrigation, stockwater) identified on record with the Idaho Department of Water Resources. (See #15-4165).

(additional pages may be attached to describe nature of the protest)

7. What would resolve your protest? Protect, preserve, and maintain Malad City's prior existing water right
without any harm, injury, or diminished use to the City's right.

I hereby, acknowledge that if I, or my designated representative, fails to appear at any regularly scheduled conference or hearing in the matter of which I have been notified at the address above, the department may issue a notice of proposed default against me in this matter for failure to appear. I also verify that I have served a copy of this protest upon the applicant.

Signed this 9th day of April, 20 20.

City of Malad City, Idaho
Protestant

Dustin Smith
Protestant's Representative

Dustin Smith

CERTIFICATE OF SERVICE

I hereby certify that on the 9th day of April 2020, I mailed a true copy of the foregoing document(s) to the following persons(s) or entity(ies) listed below by mail with correct postage thereon or causing, the same to be hand delivered or by facsimile transmission:

| <u>NAME</u> | <u>METHOD OF SERVICE</u> |
|--|---|
| Malad Forest Users Assn. P.O. Box 6 Malad City, Idaho 83252 | <input type="checkbox"/> HAND DELIVERY <input checked="" type="checkbox"/> U.S. MAIL <input type="checkbox"/> FACSIMILE |
| Malad Forest Users Assn. c/o C. Lane Hoskins, Registered Agent 8383 S. Old Highway 1919 Malad City, Idaho 83252 | <input type="checkbox"/> HAND DELIVERY <input checked="" type="checkbox"/> U.S. MAIL <input type="checkbox"/> FACSIMILE |
| Malad Forest Users Assn. c/o Austin G. Tubbs, President 5830 W. 2500 N. Malad City, Idaho 83252 | <input type="checkbox"/> HAND DELIVERY <input checked="" type="checkbox"/> U.S. MAIL <input type="checkbox"/> FACSIMILE |



Signature