

RECEIVED**MAR 15 2013**
DEPARTMENT OF
WATER RESOURCESWater Supply Bank No. _____
(For Department Use Only)**STATE OF IDAHO**
WATER RESOURCE BOARD**APPLICATION TO RENT WATER**
FROM THE WATER SUPPLY BANKName of Renter MVCP LLC Phone 208-678-1599Mailing address 474 East 550 South Burley, Idaho 83318 Email _____**A. DESCRIPTION OF WATER SOUGHT FOR RENT**

1. <u>Maximum Flow Rate (cfs)</u>	<u>Maximum Volume (ac-ft)</u>	<u>Nature of Use</u>	<u>Period of Use</u>
<u>0.83</u>	<u>469.4</u>	<u>Irrigation</u>	<u>3/15</u> to <u>11/15</u>
_____	_____	_____	_____ to _____
_____	_____	_____	_____ to _____
Total: <u>0.83</u>	<u>469.4</u>		

2. Source of water Ground Water tributary to _____

3. Point(s) of Diversion:

Twp	Rge	Sec	Lot	¼	¼	¼	County
See	Exhibit	A					

4. Lands to be irrigated or place of use:

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
12S	23E	12	11	15		27					15				0.1	14			82.1

If the use is for irrigation, show total number of acres proposed through rental. **Total Acres** 82.1**B. OWNERSHIP**1. Do you own the land at the proposed point of diversion? Yes ☒ No ☐

If no, list owner, contact information, and provide documentation of the authority to use the proposed point of diversion. _____

2. Do you own the land at the proposed place of use? Yes ☒ No ☐

If no, list owner, contact information, and provide documentation of the authority to use the proposed place of use. _____

C. MAP

Attach a map identifying the proposed point(s) of diversion, place(s) of use, and water diversion and distribution system details as described by this application in section A. Include legal description labels.

D. GENERAL INFORMATION

1. Please provide a description of the proposed diversion system. Existing well and delivery system
2. Describe any other water rights diverted through the same point(s) of diversion or used for the same purpose(s) as described above.
45-13981, 45-13982, 45-2383, 45-7118, 45-7125, 45-7317, 45-690, 45-691, 45-7004, 45-7186A
3. Will the proposed place of use receive water from any other source? Yes ☐ No ☒
If yes, describe. _____
4. If the proposed use is not for irrigation, please provide a detailed description of the proposed use and how you determined the amount of water required. Attach additional sheets if needed. N/A
5. Are there any other applications pending before the Department, such as an application for permit or transfer, for the same use(s) proposed by this rental? Yes ☒ No ☐
If yes, describe. A transfer to increase the PPU size from 4384.0 acres to 4389.0 acres.
6. Was this rental application submitted in response to a Notice of Violation or a pending Notice of Violation? Yes ☐ No ☒
If yes, describe. _____

E. RENTAL TERM

1. Do you wish to rent water from the Board's bank for more than one (1) year? Yes ☒ No ☐
If yes, please specify the number of years desired through proposed rental. 3

I hereby assert that the information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.

If this application is approved, the applicant agrees to the following:

1. The use of water under this agreement shall be subject to the provisions of Section 42-1766, Idaho Code.
2. Renter shall comply with all applicable state and federal laws while using water under this agreement.
3. Renter shall hold the Board, the Director, and the state of Idaho harmless from all liability on account of negligent acts of the renter.
4. The Director may terminate diversion of water if the Director determines there is not a sufficient water supply for the priority of the right or portion thereof being rented.
5. Failure of the renter to comply with the conditions of this agreement is cause for the Director to rescind approval of the rental agreement.
6. Renter is not authorized to use water proposed by this application until the rental fees are paid in full and the renter receives an executed copy of the agreement signed by the Director.


Signature of Applicant

Craig E Searle Partner
Printed Name and Title*

March 5, 2013
Date

Signature of Applicant

Printed Name and Title*

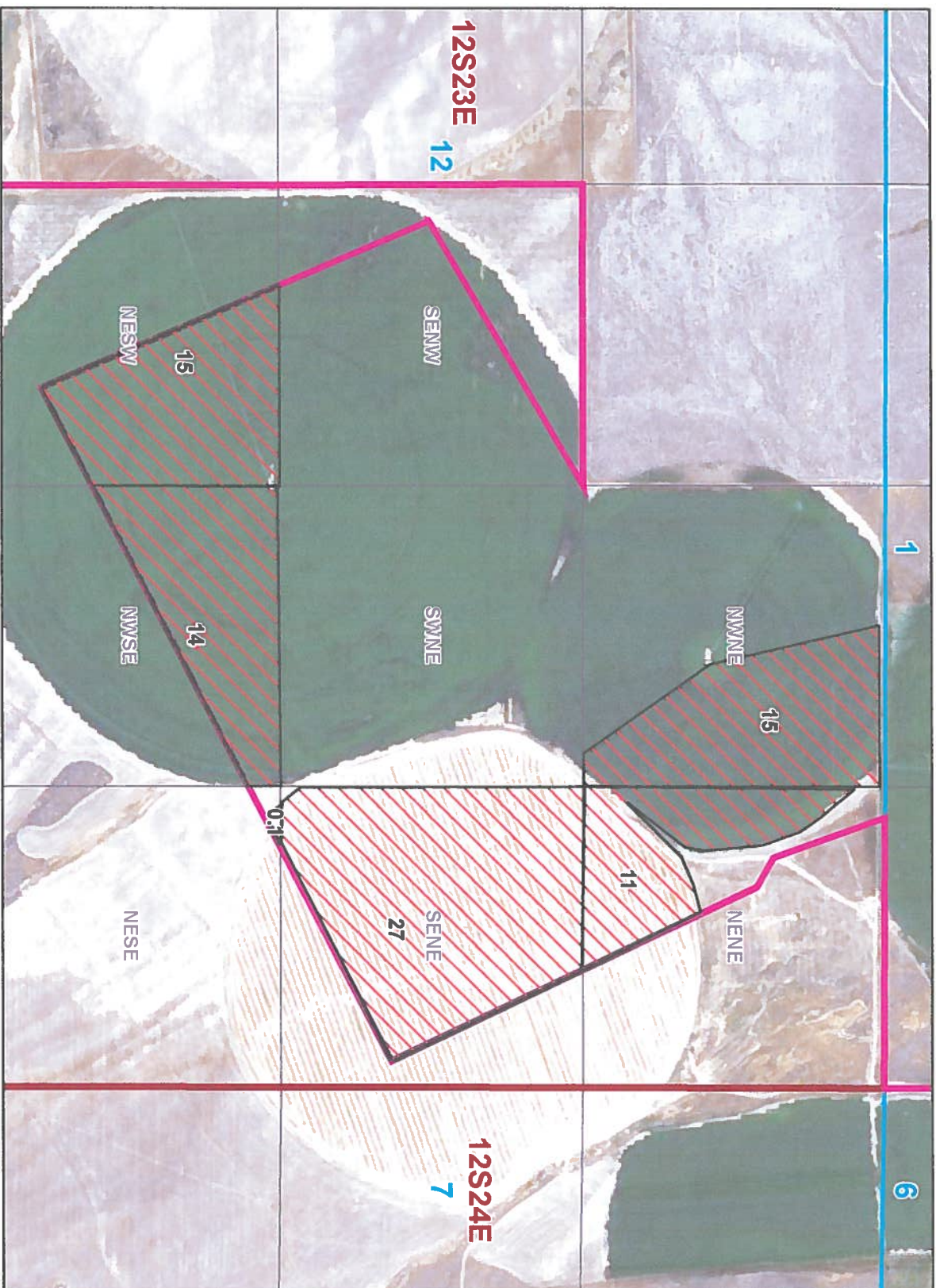
Date

*Please provide title of signatory if signing on behalf of a company or organization or with power of attorney

Mail to: Idaho Department of Water Resources, P.O. Box 83720, Boise, ID 83720-0098

Exhibit A
POD Descriptions

Lot	1/4	1/4	1/4	SEC.	Twp	Rge	County	Source	Local Name or Tag#
	SW	NW	NE	32	11S	23E	Cassia	Ground Water	
	NW	SW	NW	32	11S	23E	Cassia	Ground Water	
	SW	SW	NW	32	11S	23E	Cassia	Ground Water	
	NE	NE	SW	32	11S	23E	Cassia	Ground Water	
	SW	NW	SW	28	11S	24E	Cassia	Ground Water	
	NW	SW	SW	28	11S	24E	Cassia	Ground Water	
	SW	SW	SW	28	11S	24E	Cassia	Ground Water	
	NE	NE	SE	30	11S	24E	Cassia	Ground Water	
	SE	SE	SE	30	11S	24E	Cassia	Ground Water	
		NE	NE	31	11S	24E	Cassia	Ground Water	
	NW	NW	NW	32	11S	24E	Cassia	Ground Water	
		NW	NW	32	11S	24E	Cassia	Ground Water	
	SE	SE	SE	32	11S	24E	Cassia	Ground Water	
	NE	NE	NE	32	11S	24E	Cassia	Ground Water	
	SW	SW	SW	32	11S	24E	Cassia	Ground Water	
	SE	NE	NW	32	11S	24E	Cassia	Ground Water	
	SE	SE	SE	26	11S	23E	Cassia	Ground Water	



**SEARLE MOO VIEW COW PALACE
RENTAL APPLICATION 2013
NAIP 2011 AERIAL**

- Legend**
-  Water Rental 82.1 ac 2013
 -  Proposed_PPU_2010 = 4,383.7 acres
 -  Township_Range
 -  Section_Lines
 -  CO_Lines

No. W 71340		Due no later than Feb 28, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		CLOYD R SEARLE 474 E 550 S BURLEY ID 83318			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		MVCP, LLC CLOYD R SEARLE 474 E 550 S BURLEY ID 83318					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CLOYD R SEARLE	474 E 550 S	BURLEY	ID	USA	83318	
MANAGER	KENT R SEARLE	476 E 600 S	BURLEY	ID	USA	83318	
MANAGER	CRAIG E SEARLE	522 E 600 S	BURLEY	ID	USA	83318	
MANAGER	CLIFFORD L SEARLE	500 E 500 S	BURLEY	ID	USA	83318	
MANAGER	KELLY C SEARLE	739 S 50 W	BURLEY	ID	USA	83318	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 71340		Signature: Cloyd Searle		Date: 12/28/2012			
		Name (type or print): Cloyd Searle		Title: Manager			
Processed 12/28/2012		* Electronically provided signatures are accepted as original signatures.					