

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

To appropriate the public water of the State of Idaho

RECEIVED
AUG 08 2007
DEPT. OF WATER RESOURCES
SOUTH S. BLDG.

1. Name: ALBION RANCH 2006 LLC
7595 EAST MCDONALD DR STE 130
SCOTTSDALE AZ 85250
(480) 947-3100

2. Source: UNNAMED STREAM Tributary to: BLACKSMITH CREEK

3. Location of Point of Diversion:

#1 UNNAMED STREAM NW1/4SE1/4 Sec. 2, Twp 13S, Rge 25E, B.M.
CASSIA County

4. Water will be used for the following purposes:

<u>Purpose</u>	<u>From</u> <u>To</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
STOCKWATER STORAGE	01/01 to 12/31		0.2 AF

5. Total quantity to be appropriated is: 0.2 AF

6. Proposed diverting works:

POINT OF DIVERSION #1

a. Type and size of devices used to divert water from the source: SMALL EARTH EMBANKMENT
ACROSS CHANNEL FORMING A SMALL POND

- b. Height of storage dam 6 feet;
Active reservoir capacity 0.2 acre-feet;
Total reservoir capacity 0.2 acre-feet;.

- c. Proposed well diameter is _____ inches;
Proposed depth of well is _____ feet.

- d. Is ground water with a temperature of greater than 85F being sought?

- e. If well is already drilled, when? _____;
Drilling Firm _____;
Drilling Permit No. _____.

7. Time required for the completion of the works and application of the water to the proposed beneficial use is 1 year(s).

- 8.

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PLACE OF USE: STOCKWATER STORAGE

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
13S	25E	2														X			

9a. Who owns the property at the point of diversion? If other than applicant, describe the arrangement enabling the applicant to make this filing.

APPLICANT

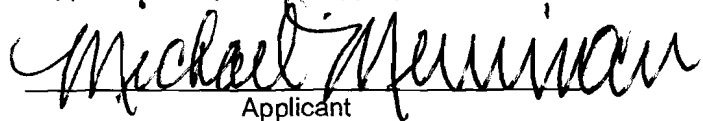
9b. Who owns the land to be irrigated or place of use? If other than applicant, describe the arrangement enabling the applicant to make this filing.

APPLICANT

10. Remarks:

11. Map of proposed point of diversion and place of use attached? ☐

BE IT KNOWN that the undersigned hereby makes application for permit to appropriate the public waters of the State of Idaho as herein set forth.

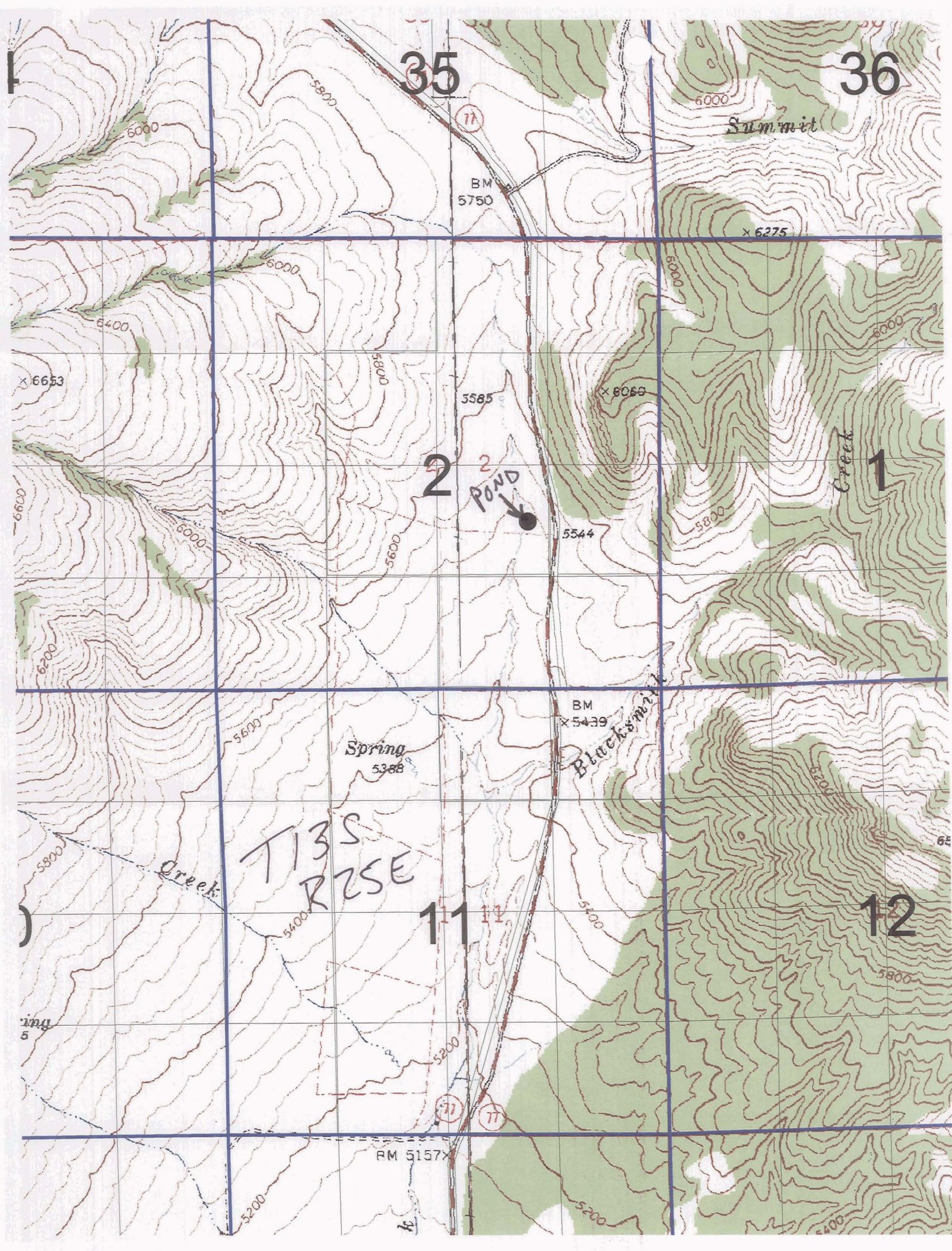

Applicant

Received by C. SKINNER Date 8/8/2007 Time PM Preliminary check by C. SKINNER
Publication prepared by _____ Date _____ Published in _____
Publication approved _____ Date _____

Receipt No. 5029662

Date: 8/8/2007

Received by: C. SKINNER



No. W 48637	D. no later than March 31, 2007	2. R. Registered Agent and Office 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 1. Mailing Address - Correct in this box, if applicable ALBION RANCH 2008, L.L.C. 7595 E MCDONALD DR STE 130 SCOTTSDALE, AZ 85250	J EVAN ROBERTSON 161 5TH AVE S STE 100 TWIN FALLS, ID 83301																		
		3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>Member Michael L. Merriman</td> <td>7595 E McDonald Dr #130</td> <td>Scottsdale</td> <td>AZ</td> <td>85250</td> </tr> <tr> <td></td> <td>member Patricia J. Merriman</td> <td>10365 E Cholla</td> <td>Scottsdale</td> <td>AZ</td> <td>85260</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip		Member Michael L. Merriman	7595 E McDonald Dr #130	Scottsdale	AZ	85250		member Patricia J. Merriman	10365 E Cholla	Scottsdale	AZ	85260
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5. Organized Under the Laws of: IDAHO W 48637	6. Signature <u><i>Michael Merriman</i></u> Date <u>3/26/07</u> Name (Typed or Printed) <u>Michael L. Merriman</u> Title <u>Member</u>																			

Issued 01/02/2007

Do Not Tape or Staple

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