1		
2	Name of Owner/Cross-Defendant/Attorney	
3	Address	
4	Address	
5	Phone Number	
6	Email Address	
7		
8		
9		HE STATE OF CALIFORNIA
10	FOR THE COUNTY OF ORAN	IGE, CIVIL COMPLEX CENTER
11	MOJAVE PISTACHIOS, LLC; et al.,	Case No. 30-2021-01187275-CU-OR-CJC
12	Plaintiffs,	[Related to: 30-2021-01187589-CU-WM-CXC
14	v.	& 30-2021-01188089-CU-WM-CXC
15	INDIAN WELLS VALLEY WATER	Assigned For All Purposes To: The Honorable Kirk Nakamura, Dept. CX103
16	DISTRICT; et al.,	
17	Defendants.	
18	INDIAN WELLS VALLEY WATER DISTRICT,	ANSWER TO ADJUDICATION CROSS-COMPLAINT
19	·	CROSS-COMI LANVI
20	Cross-Complainant,	
21	v.	
22	ALL PERSONS WHO CLAIM A RIGHT TO EXTRACT GROUNDWATER IN THE	
23	INDIAN WELLS VALLEY GROUNDWATER BASIN NO. 6-54	
24	WHETHER BASED ON	
25	APPROPRIATION, OVERLYING RIGHT, OR OTHER BASIS OF RIGHT, AND/OR	
26	WHO CLAIM A RIGHT TO USE OF STORAGE SPACE IN THE BASIN; et al.,	
27 28	Cross-Defendants.	
	{00183720.2}	•

ANSWER TO ADJUDICATION CROSS-COMPLAINT

ANSWER TO ADJUDICATION CROSS-COMPLAINT

The undersigned denies all material allegations in the complaint or cross-complaint in this action that seeks to adjudicate rights in the Indian Wells Valley Groundwater Basin - Department of Water Resources Bulletin 118 Groundwater Basin No. 6-54 and asserts all applicable affirmative defenses to that complaint or cross-complaint.

complaint or cross-complaint. Dated: Signature Name - Printed Defendant Name Mailing Address: Street Address City State & Zip Code Phone Number Email Address

{00183720.2 }

Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address
Parcel No.(s) Street Address City State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
Street Address City State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
Street Address City State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
City State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
State & Zip Code Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address Street Address
Attorney Information (if applicable): Company/Firm Name Attorney Name Street Address
Company/Firm Name Attorney Name Street Address
Company/Firm Name Attorney Name Street Address
Attorney Name Street Address Street Address
Street Address 18
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City
State & Zip Code
Phone Number
Fax Number
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Email Address 28
400183720.2 } 2 ANSWER TO ADJUDICATION CROSS-COMPLAINT