

Contacts Data Entry Form

Claim Number: _____

Owner Type	Full Name	Address	City	State	Zip
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Current Owner: _____ Phone No.: _____

Current Owner: _____ Phone No.: _____

Current Owner: _____ Phone No.: _____

Name connector: and _____, or _____, and/or _____.

Representing Attorney: _____ Phone No.: _____

Accompanied By: _____ Phone No.: _____

Relationship to Claimant: _____ Date of Field Exam: _____

Discussion of right origin and split history. Questions and problems.

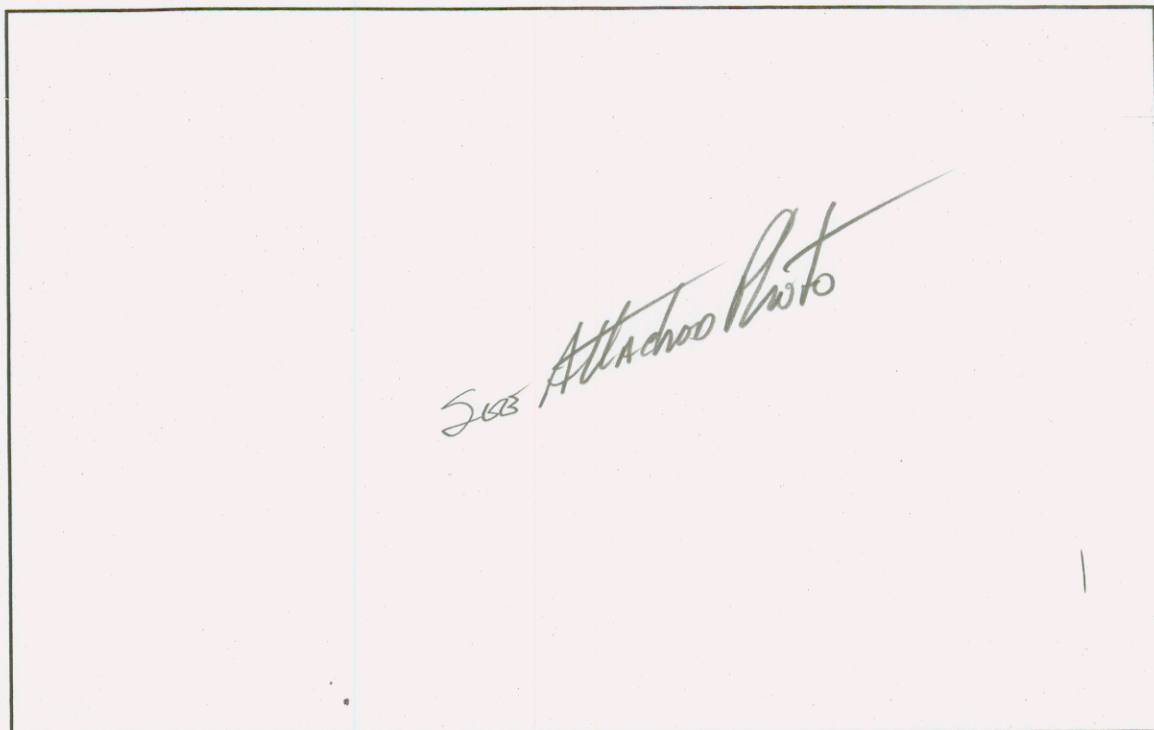
LICENSED 10/1957 AT 84 cfs ON 635⁹² AC, MAY 2, 53.
SPLITS DUE TO Cfs: $84 \div 635^{93} = 0.0132 \text{ cfs/AC}$

SEE TR 3542 AND 4074

6/17/04 VISITED w/ MRS. QUINN - ADVISOR OF HOR WR AND
THAT SHE NEEDED TO DO A Cfs - GAVE FORM

Reviewer: _____ Date: _____

Water Right No(s). _____



GPS DATA:

Tag # A0014221 Location: _____

Diversion Data:

Source: Well Trib to: _____

MOTOR

Make: _____ Model: _____ Hp: _____
SN: _____

PUMP

Make: _____ Model: _____ Disch: _____
SN: _____

NOTES:

Submersible pump - Took pictures and tagged
pump.

Field Exam Date: 6/17/04 Agent: DD & AR

Claim Number: _____

Water Right Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary to : _____

Water Right Point of Diversion: T _____, R _____, Sec. _____, _____, _____, _____, County: _____

Source: _____ Tributary to : _____

Twp	Rge	Sec	Gov Lot	QQQ of QQ of Q	County	Source	Tributary to

Twp	Rge	Sec	Gov Lot	QQQ of QQ of Q	County	Source	Tributary to

Other rights from this POD? _____

Transfers Pending or approved: _____

Document how the POD and Source were verified:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears slightly aged or off-white. There is no handwriting or other markings on the page.

Reviewer: _____ Date: _____

Season of Use and Quantity Data Entry Form

Claim Number: _____

Water Right Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Claimed Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
_____	_____	10/15	0.132	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Recommended Period of Use and Diversion Rate

Water Use	Start	End	Rate	Volume
Spring	4/15	10/31	0.132	3045
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Overall Diversion Rate _____

Overall Diversion Volume _____

Document how the Period of Use and/or Diversion Rate were verified:

Q OF ORIGINAL LICENSE = 0.0132 cfs/ac
 ∴ 31 AC x 0.01321 = 0.115 cfs ⇒ CONCENTRATED Q AT 0.015 cfs/ac
 SOIL NOT ADDRESSED BY LIC. ⇒ DPT STD 4/15 TO 10/31.

COMBINED USE w/ 22-2161F: Limited to 0.02 cfs @ 3045 AFA

Remark

Reviewer: _____

Date: _____

