

Water Right Number - R35-022768

Prefix Translation: RESEARCH

Old (D) Number - 23213

+ - - - - Last Name - - - - + + - First Name - - + + - - - - - Address - - - - - +

*** C - CURRENT OWNER ***
WALKER

DENNIS L

1 - 2035 W 200 S

2 -

3 -

City- PINGREE

State- ID Zip- 83262

Phone - 208-684-4600

+ - - Priority Date - - + + - - - Region - - - + + - - - Stage - - - + + - - - Status - - - +
11/03/1952 15 EASTERN L - LICENSE+ - - - - Source - - - - - + + - - - - - Tributary - - - - - +
GROUNDWATER+ - - - - Point of Diversion - - - - - +
Twn Rng Sec Tract Lot RFlg County

03S 32E 15 NW NE (11) BINGHAM

+ - - - - Water Use - - - - - +
Code Description Period From Period To Diversion Rate Diversion Volume

43 - DOMESTIC 01/01 12/31 0.040

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Consumptive Use - + + - KW Usage - +
0.040 0.0+ - - - - Place of Use - - - - - +
Twn Rng Sec Tract Lot Acres Code Description County

03S 32E 15 NW NE 43 DOMESTIC (11) BINGHAM

Total Acres:

+ - - Diversion Means - WELL, PUMP, TO 1 HOME

+ - - Non-Irrigation Use - DOMESTIC, 1 HOME; STOCKWATER, 300 RANGE CATTLE

+ - - Other Rights for Same Use -

+ - - - - Remarks - - - - - +
USE OF THIS RIGHT WITH RIGHT NO. 35-02276A IS LIMITED TO A
TOTAL COMBINED DIVERSION RATE OF 3.34 CFS+ - - - - Old Water Right Numbers - - - - - +
No Old Water Right Numbers Found+ - - - - Conditions of Approval - - - - - +
No Conditions of Approval found.

PROTECTED

SCANNED
AUG 09 2005

November 20, 1998

**NOTICE OF ERROR
REPLY**

RECEIVED
DEC 07 1998
Department of Water Resources

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: December 18, 1998

Water right number: 35-02276B

DENNIS L WALKER
2035 W 200 S
PINGREE ID 83262

Daytime Telephone Number:
Evening Telephone Number: 684 4600

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):
2. Describe the changes you wish to make in the proposed recommendation:
3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation; no changes need to be made.

DATE: 12/02/98 SIGNATURE: Dennis Walker
Please print your name: Dennis Walker

IDWR Eastern Regional Office, 900 N. Skyline Drive, Suite A, Idaho Falls, ID 83402-1718, (208) 525-7161

PROFILED

SCANNED
AUG 09 2005

7/0