

State of Idaho
Department of Water Resources
Transfer of Water Right(s)
RECOMMENDATION FORM

RE: Transfer No. 85467

Transfer Applicant's Name: CITY OF AMMON
2135 S AMMON RD
AMMON, ID 83406

Watermaster's Recommendation:

- a) X I do not oppose approval of this application.
- b) I do not oppose approval of this application if it is conditioned
as follows:
- c) I oppose approval of this application for the following reasons:
- d) Additional comments:

Dated this 4th day of November 2021

Blake Jordan

Blake Jordan
Watermaster's Signature
WD120