## State of Idaho Department of Water Resources

## **RECOMMENDATION OF WATERMASTER**

Transfer No(s).: 83920

Applicant's Name: ROCKY MOUNTAIN WATER EXCHANGE

Watermaster's Recommendation:

- a) 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 Comment:

Dated this \_\_\_\_\_ day of March\_\_\_\_\_, 2020

Water District No: 120

Watermaster's Signature