

State of Idaho
Department of Water Resources

RECOMMENDATION OF WATERMASTER

Transfer No(s).: 81930

Applicant's Name: Larsen

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 20th day of December, 2017.

Water District No: 110



Watermaster's Signature