

State of Idaho  
Department of Water Resources

**RECOMMENDATION OF WATERMASTER**

Transfer No(s).: 81527

Applicant's Name: Sugar City

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 4<sup>th</sup> day of May, 2017.

Water District No: 100

  
Watermaster's Signature