

State of Idaho
Department of Water Resources
Application for Transfer

RECEIVED

APR 06 2015

DEPARTMENT OF
WATER RESOURCES

RECOMMENDATION FORM

Application No.: 79898

Applicant's Name:
ELLSWORTH ANGUS RANCH
PO BOX 60
LEADORE ID 83464

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 2 day of 4, 2015

Water District No. 74W

Watermaster's Signature

