

**IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET**

W.R. # 95-10527

APPLICATION ID # 75593

ENT. 5/12 BCA 6/11/09 OK to Publish 6/9/09

INITIAL REVIEW

APPLICANT: West Season's Acres HOA

BY: KJ

DATE: 5/17/09

ITEM REQUIRED INFORMATION

1. ☒ Name and Address
2. ☒ Source
3. ☒ Point of Diversion & County
4. ☒ Quantity
- ☒ Nature of Proposed Use
- ☒ Period of Use
5. ☒ Total Quantity
6. ☒ Description of diverting works
7. ☒ Time required for b/u
8. ☒ Proposed use
9. ☒ Place of use or acres irrigated
10. ☒ Other water Rights
11. ☒ Ownership
12. ☒ Map
- ☒ Signature
- ☒ Fee (Amt, receipt, acknowledgement)

*** Send info sheet Y() N()

ADDITIONAL INFORMATION

(Yes)(No)

- ☒ Shape File Created Date 5/12/09 By: KJ
- ☐ Field check: by _____
- ☐ Field report attached
- ☐ Analysis Supp. attached(>5cfs/500af)
- ☐ Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No)

PRIORITY DATE: 5/17/2009

(Include Moratorium Remark)

Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af)

ADVERTISE IN:

Keetonai County

Newspaper: Cda Press

Dates scheduled for publication 6/18-25/09

Affidavit of Publication received: 6/30/09

Dates actually published: 6/18-25/09

Application published correctly. Yes ☒ No ☐

If not, action taken: _____

Final Date for Protest: 7/6/09

Protests Received: Yes _____ No ☒

LETTERS SENT REQUESTING:

- () Dam Information () Fish Information
- () Power Information () Other: _____

INFORMATION RECEIVED:

- () Dam Information () Fish Information
- () Power Information () Other: _____

GROUNDWATER SECTION

WD Permit No.'s:	Tag #	Type:	Fees	Receipt No.	Upgrade Needed?
_____	<u>00003412</u>	Dom. ☒ Non-Dom. _____	Paid \$ _____	_____	Y() N(☒)
_____	_____	Dom. _____ Non-Dom. _____	Paid \$ _____	_____	Y() N()
_____	_____	Dom. _____ Non-Dom. _____	Paid \$ _____	_____	Y() N()

- ☒ Groundwater management area
- ☒ Critical ground water area
- ☒ Well Drilling Permit required
- ☒ Well Drilling Application and Fees received
- ☒ Well Drilling Application approved?

Remarks: _____

FINAL REGIONAL PROCESSING/REVIEW

(Yes)(No)

- ☒ Notice of pending void order issued. Final order response date: _____/_____/_____
- ☒ Further information required from applicant

- ☒ Measuring device required
- ☒ Measuring port required
- ☒ Special conditions: Bathrium Prairie GWMA
- ☐ Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: Kent D. Smith Date: 7/16/2009 Sr. Agent initial KJ