

IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

W.R. # 95-10759

APPLICATION ID # 75724

ENT. 7/29/09 BCA 7/29/09 OK to Publish 7/29/09

APPLICANT: GIESEN INITIAL REVIEW BY: [Signature] DATE: 7/21/09

ITEM REQUIRED INFORMATION

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

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

ADDITIONAL INFORMATION

(Yes)(No)
Shape File Created Date _____ By: _____
Field check: by _____
Field report attached _____
Analysis Supp. Attached (>5cfs/500af) _____
Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No) PRIORITY DATE: 6/23/09
(Include Moratorium Remark)
Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af).
ADVERTISE IN: Kootenai County
Newspaper: CDA Press
Dates scheduled for publication 8/6 & 13/09
Affidavit of Publication received: 8/14/09
Dates actually published: 8/6 & 13/09
Application published correctly. Yes ☒ No _____
If not, action taken: _____
Final Date for Protest: 8/24/09
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?
_____	_____	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: _____
Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: [Signature] Date: 9/4/09 Sr. Agent initial KJ