

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

W.R. # 95-10392

APPLICATION ID # 75539

ENT. 4/17 BCA 4/28/09 OK to Publish 4/29/09

APPLICANT: Mary Anita Skrobot INITIAL REVIEW BY: K&S DATE: 4/17/2009

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 4/17/09 By: K&S
 _____ Field check: by _____
 _____ Field report attached
 _____ Analysis Supp. attached(>5cfs/500af)
 _____ Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No) PRIORITY DATE: 4/16/2009

☒ (Include Moratorium Remark)
☒ Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af).

ADVERTISE IN: Kootenai County

Newspaper: Ada Press

Dates scheduled for publication 5/7 & 14/09

Affidavit of Publication received: 5/20/09

Dates actually published: 5/7 & 14/09

Application published correctly. Yes ☒ No _____

If not, action taken: _____

Final Date for Protest: 5/20/09

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: (Above Dam) MSF

_____ Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: Emily Davis Date: 5/28/2009 Sr. Agent initial ELL