

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

W.R. # 95 - 10207

APPLICATION ID # 75473

ENT EPD

BCA 3/23/09

OK to Publish 3/23/09

APPLICANT: MARVIN

INITIAL REVIEW

BY: EPD

DATE: 3/20/2009

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 3-20-09 By: EPD
- Field check: by _____
- Field report attached _____
- Analysis Supp. Attached (>5cfs/500af) _____

Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No)

PRIORITY DATE: 3/19/2009

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

ADVERTISE IN:

Newspaper: oda Kootenai County

Dates scheduled for publication 4/2-9/09

Affidavit of Publication received: 4/14/09

Dates actually published: 4/2-9/09

Application published correctly. Yes ☒ No _____

If not, action taken: _____

Final Date for Protest: 4/20/09

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: Barndrum Prairie GWM A
- ☒ Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: Barndrum

Date: 5/6/2009 Sr. Agent initial KJ