

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

W.R. # 95-10096

APPLICATION ID # 75390

ENT. 2/2 BCA 2/4/09 OK to Publish 2/4/09

APPLICANT: Edward and/or Marilyn Bollins

INITIAL REVIEW

BY: KJ

DATE: 2/2/2009

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 2/2/09 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: 2/2/2009

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

ADVERTISE IN:

Newspaper: Kootenai County
Ada Press
 Dates scheduled for publication 2/19-26/09
 Affidavit of Publication received: 3/2/09
 Dates actually published: 2/19-26/09
 Application published correctly. Yes ☒ No ☐
 If not, action taken: _____

Final Date for Protest: 3/9/09

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>752,679</u>		Dom. ☒ Non-Dom. ☒	Paid \$ <u>190.00</u>	<u>N019892</u>	Y ☒ N () <u>paid</u>
		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:

Bertie L. ... Date: 3/18/09 Sr. Agent initial KJ