

IOWA DEPARTMENT OF WATER RESOURCES APPROPRIATION APPLICATION ANALYSIS SHEET

W.R. # 96-9414

APPLICATION ID # 75259
INITIAL REVIEW

ENT. 11/28/08 12/5/08 OK to Publish

APPLICANT: Eric & Patti Brakken BY: KJ DATE: 11/28/2008

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 11/28 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: 11/20/2008

____ (Include Moratorium Remark)

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

ADVERTISE IN: Bonner County

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
- 2/6 _____ Affidavit of publication received
- ✓ _____ Application published correctly. If not, record action taken: _____

1/8/09 _____ Publication dates and paper recorded on application

Sr. Agent initial AS

_____ Protests received, Final protest date: 2/2/09

_____ Measuring device required

_____ Measuring port required

_____ Special conditions: _____

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

Approval Recommended by: _____

Date: 2/9/09