

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

W.R. # 86-11984

APPLICATION ID # 75055
INITIAL REVIEW

ENT 9/1 BCA 10/2/08 OK to Publish 10/2/08

APPLICANT: JACK; Barbara Grindle BY: [Signature] DATE: 9/22/2008

ITEM REQUIRED INFORMATION

PROCESSING

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

(Yes)(No) PRIORITY DATE: 8/25/2008

☒ (Include Moratorium Remark)

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

ADVERTISE IN: LATAM County

LETTERS SENT REQUESTING:

- () Dam Information () Fish Information
() Power Information () Other: _____

INFORMATION RECEIVED:

- () Dam Information () Fish Information
() Power Information () Other: _____

ADDITIONAL INFORMATION

(Yes)(No)

- ☒ Shape File Created Date 7/24/08 By: [Signature]
☐ Field check: by _____
☐ Field report attached
☐ Analysis Supp. attached(>5cfs/500af)
☐ Water delivered by water master? Water District # _____

GROUNDWATER SECTION

WD Permit No.'s:	Tag #	Type:	Fees	Receipt No.	Upgrade Needed?
<u>281308</u>		Dom. ☒ Non-Dom. ☐	Paid \$ _____	_____	Y() N(<u>X</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
10/22 ☒ Affidavit of publication received
☐ Application published correctly. If not, record action taken: _____

☒ Publication dates and paper recorded on application

Sr. Agent initial [Signature]

☒ Protests received, Final protest date: 11/03/08

☒ Measuring device required

☒ Measuring port required

☒ Special conditions: _____

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

Approval Recommended by:

[Signature]

Date: 11/10/2008