

RECEIVED

APR 23 2007

State of Idaho
DEPARTMENT OF WATER RESOURCES
WATER RIGHT BENEFICIAL USE FIELD REPORT

11-7342

Permit No. _____

CONTACT WITH PERMIT HOLDER

	DATE	INITIALS	REMARKS
☐ Appointment letter mailed:	4/2/07	CB	Spoke with stephany Wuthrich 847-0694 They sold this to Dr. John Franson.
☐ Telephone call made (List Telephone No. used)			Dr. Franson 547-1811 - Lyri message
☐ Appointment scheduled for: (Date, time, location)	Soda. office visit. 4/3/07	CB	Julie Franson said they developed the Spring. According to Julie there are his- sante there have domestic and a few animals. (John & Julie Franson developed the spring). They installed a custom fence - NRCS 1.5 acres owned by Frans is in CRP by Utah Process. No development.
	4/9/07	CB	

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

11-7342
Permit No.

Staff Analysis Sheet
for
Beneficial Use Field Report

A. Prior to Conducting the Exam, the File Contains:

- ☐ Blank Field Report Form
- ☐ Copy of Permit
- ☐ Copies of any Amendments/Orders with conditions of approval
- ☐ Computer Data Proof Report
- ☐ Copy of U.S.G.S. Quad
- ☐ Check for Government Lots. If so, make a copy of Government Plat

Check of P/D index _____ (Initial and date)

Overlap? ☐ yes ☐ no If yes: ☐ copy of exam(s) attached?

Type of Overlap? ☐ Add acres or uses to existing system

☐ Increase rate of flow or volume

☐ Other: _____

Check of P/U index _____ (Initial and date)

Overlap? ☐ yes ☐ no If yes: ☐ copy of water right(s) attached?

Type of Overlap? ☐ Increase rate of flow or volume

☐ Add P/D's

☐ Increase number of acres within tracts

☐ Other: _____

Aerial Photo

Required? ☐ yes ☐ no If yes: ☐ copy attached?

Scheduling Letter sent? _____ (Initial and date)

☐ Appointment made and telephone conversation memo attached

B. After Conducting the Exam, the File Contains:

- ☐ Fully completed and signed Field Report Form
- ☐ Photographs of Point of Diversion and Place of Use
- ☐ Corrected Computer Data Proof Report with recommended license information, and date and signature of examiner.

C. Review and Processing:

Exam Completed _____ (Signature of examiner and date)

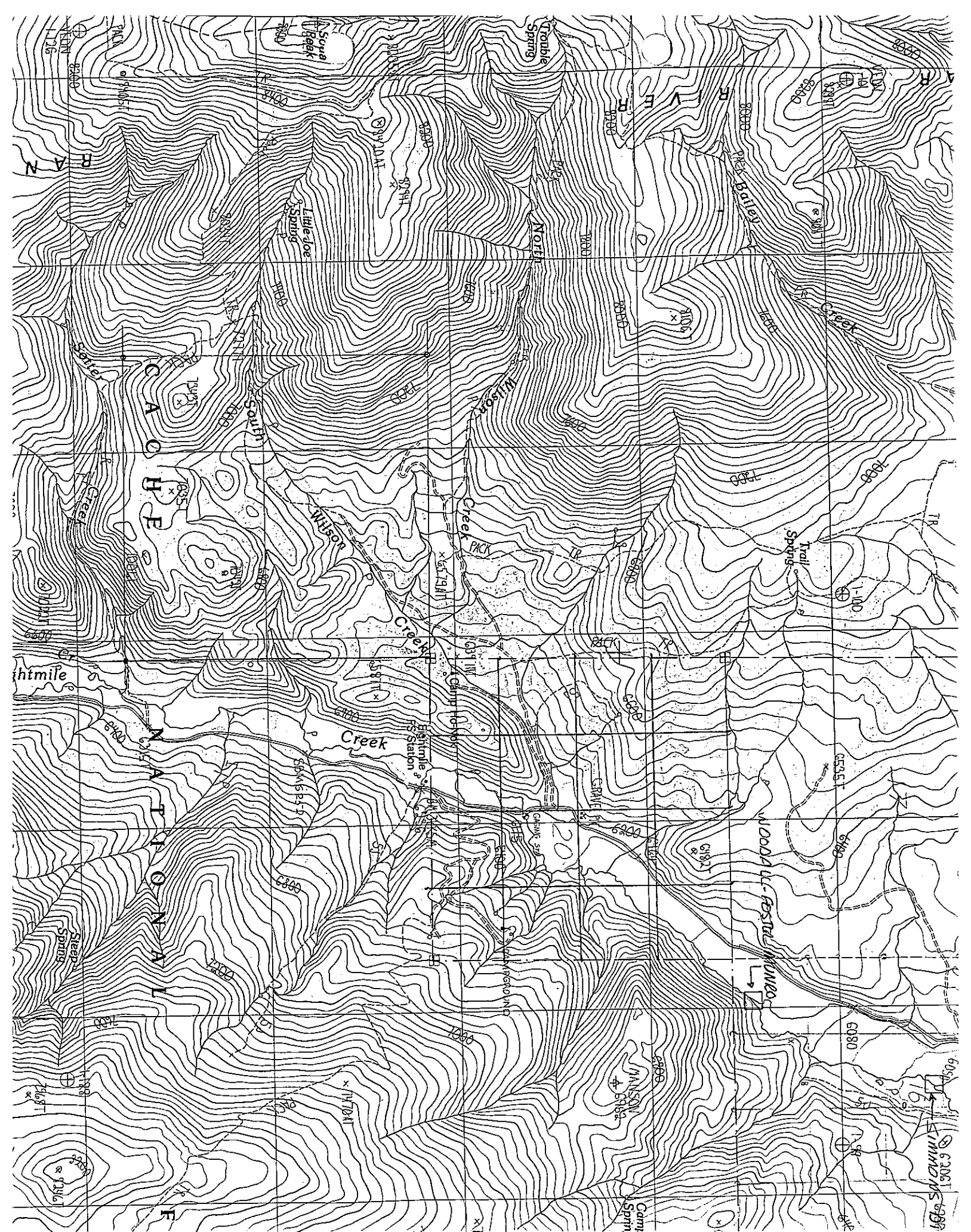
Exam Reviewed by Senior Water Resource Agent _____ (Initial and date)

Exam Reviewed by Manager of Regional Office _____ (Initial and date)

Exam Date Entered in Computer _____ (Initial and date)

Exam sent to State Office _____ (Initial and date)

Copy of Staff Analysis Sheet sent to Manager of Regional Office and Original
Refiled in White File _____ (Initial and date)



DATE: 09/02/99

10400 DEPARTMENT OF WATER RESOURCES
WATER RIGHTS BY POINT OF DIVERSION

DATE: 09/02/0

IDAH0 DEPARTMENT OF WATER RESOURCE
WATER RIGHTS BY POINT OF DIVERSION

