

IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

W.R. # 03-10263

APPLICATION ID # 74289
INITIAL REVIEW

ENT. 11/8/07 EBCA 11/21/07 OK to Publish 11/21/07

APPLICANT: John Larson BY: KJ DATE: 11/8/2007

ITEM REQUIRED INFORMATION

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)

PROCESSING

(Yes)(No) PRIORITY DATE: 11/5/8.007

☒ (Include Moratorium Remark)

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

ADVERTISE IN: Nez Perce County

LETTERS SENT REQUESTING:

☒ Dam Information ☒ Fish Information
☒ Power Information ☒ Other: No

INFORMATION RECEIVED:

☒ Dam Information ☒ Fish Information
☒ Power Information ☒ Other: No

*** Send info sheet Y() N()

ADDITIONAL INFORMATION

(Yes)(No)
☒ Shape File Created Date 11/5/07 By: KJ
☐ 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?
_____	_____	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
☒ Affidavit of publication received
☐ Application published correctly. If not, record action taken: _____

11/29 Publication dates and paper recorded on application
☒ Protests received, Final protest date: 12/24/07

Sr. Agent initial KJ

- ☒ Measuring device required
- ☒ Measuring port required
- ☒ Special conditions: Screened Pump Intake
- ☒ Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: Keith L. Sanklin Date: 11/8/08