

# IOWA DEPARTMENT OF WATER RESOURCES APPROPRIATION APPLICATION ANALYSIS SHEET

W.R. # 95-9418

APPLICATION ID # 74202  
INITIAL REVIEW

ENT. 15 BCA 10/19 OK to Publish 10/19/07

APPLICANT: GERBITZ BY: 15 DATE: 10/4/07

## 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)

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

## ADDITIONAL INFORMATION

(Yes)(No)

- ☒ Shape File Created Date 10/4 By: 15
- ☐ Field check: by \_\_\_\_\_
- ☐ Field report attached
- ☐ Analysis Supp. attached(>5cfs/500af)
- ☐ Water delivered by water master? Water District # \_\_\_\_\_

## PROCESSING

(Yes)(No)

PRIORITY DATE: 8/27/2007

☐ (Include Moratorium Remark)

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

ADVERTISE IN: CR/shuro

KOOTENAI 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. <input checked="" type="checkbox"/> Non-Dom. _____ | Paid \$ <u>35</u> | _____       | Y ( ) N ( <input checked="" type="checkbox"/> ) |
| _____            | _____ | 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: Straight domestic  
wrap.

## FINAL REGIONAL PROCESSING/REVIEW

(Yes)(No)

- ☐ Notice of pending void order issued. Final order response date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- ☐ Further information required from applicant
- 11/9 ☒ Affidavit of publication received
- ☒ Application published correctly. If not, record action taken: \_\_\_\_\_

10/25 ☒ Publication dates and paper recorded on application

☒ Protests received, Final protest date: 11/19/07

Sr. Agent initial KD

☒ Measuring device required

☒ Measuring port required

☒ Special conditions: Groundwater Prairie G.W.M.

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

Approval Recommended by:

Leitha Date: 11/26/07