

ATTN: MICHAEL HOLIDAY
Received Time Apr 27 11:26AM

12/99

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECOMMENDATION OF WATERMASTER

Application No: _____

Applicant's Name: MERIDITH J. DOTZNEROD

Watermaster's Recommendation:

- a) X I do not oppose approval of this application.
b) _____ I do not oppose approval of this application if it is conditioned as follows: _____

- c) _____ I oppose approval of this application for the following reasons: _____

- d) _____ Additional Comment: _____

Dated this 27 day of APRIL, 2007

Water District No: 34

Robert W. Shaffer
Watermaster's Signature

Use reverse side of page if you need more space.

No 1664 F 4

12/99