

APPLICATION FOR AMENDMENT OF A PERMIT

Name of Applicant: Idaho Department of Parks & Recreation Phone: (208) 334-419

Mailing address: Statehouse Mail, PO Box 83720, Boise, ID 83720-0065

I am the owner and the holder of Permit to appropriate the Public Waters of the State of Idaho No. : 11-7426, and request that the permit and permit map be amended and/or changed as follows:

Purpose of Amendment: X Change point of diversion Add point of diversion
 X Change place of use Change nature of use Change period of use Other

1. Point of diversion: _____ ¼ SW ¼ NE ¼, Section 24, Township 16S, Range 44E, Lot 2, B.M.,
County of Bear Lake Other points of diversion

2. Period and nature of use: (irrigation, domestic, stockwatering, industrial, etc.)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per year) (water use) (Begin Month) (End month)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per year) (water use) (Begin Month) (End month)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per year) (water use) (Begin Month) (End month)

3. Place of use or land to be irrigated:

[illegible]

Total number of acres to be irrigated	5.0
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4. a. Who owns the property at the point of diversion? APPLICANT

b. Who owns the land to be irrigated or place of use? APPLICANT _____

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing:

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Department of Water Resources
Eastern Region

Complete the following map by showing land and point of diversion as proposed by this amendment.
Show $\frac{1}{4}$ $\frac{1}{4}$, section, township, range and ditches. (The smallest subdivision represents 40 acres.)

Scale: 2 inches equal 1 mile

I hereby request approval of this change subject to the fact that no one will be injured by the change, and that the change will be made at my own risk.

Signed this 6th day of November, 20 06.


Mary Lucachick, Resource Specialist
Permit Holder Signature (and title, if for a company or organization)

ACTION OF THE DEPARTMENT OF WATER RESOURCES

Preliminary check by _____ Publication prepared by Se Date _____

Published in News Examiner Publication dates 12/6 & 12/13/06

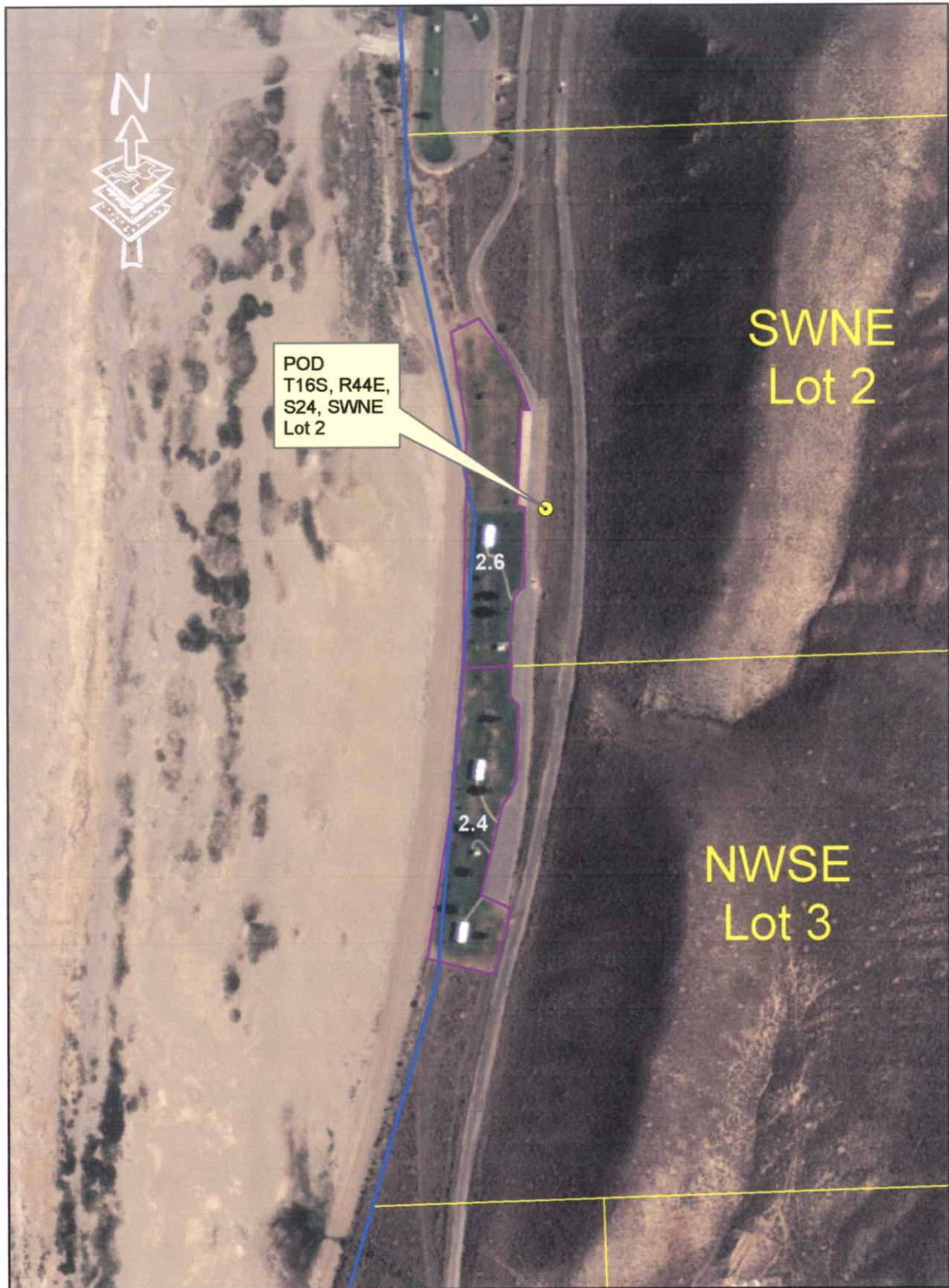
I, _____, of the Department of Water Resources hereby

Witness my hand this _____ day of _____, 20 _____.

SIGNATURE

IDAHO DEPARTMENT OF PARKS & RECREATION

T16S, R44E, S24



5.0 ACRES IRRIGATION

PERMIT 11-7426

Map prepared
by: RDH 11-6-06