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State of Idaho
Department of Water Resources

71571
CLAIM ANALYSIS SHEET

RECEIVED

MAR 10 2005

DEPARTMENT OF
WATER RESOURCES

INITIAL REVIEW BY: se

Right Number 87-10035 Applicant Weber

NOTE: IF ANY OF THE ITEMS BELOW ARE MISSING, THE CLAIM IS INCOMPLETE AND MUST BE RETURNED IMMEDIATELY TO THE CLAIMANT ALONG WITH THE APPROPRIATE COVER LETTER.

CHECK:

- ☒ Name and address.
- ☒ Date of priority. (Check for a date past the mandatory filing dates.) (One date only.)
- ☒ Source.
- ☒ Quantity, use, period.
- ☒ Point(s) of diversion.
- ☒ Location of use.
- ☒ Signature/notarization/fee.

MP/Thurs 6/10/404
ok to pub
a B.C.A. Ⓟ

pub M. P. Pullman
10/21 + 27/01

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received.
- ☒ Claim published correctly.
- ☐ Exceptions processed.

By _____ Date _____

STATE OFFICE PROCESSING:

- ☒ Claim review complete.

By S. Keen Date 3/11/05

Are View Done