State of Idano



DEPARTMENT OF WATER RESOURCES

900 N. Skyline Dr., Suite A, Idaho Falls, ID 83402-1718 • Phone: (208) 525-7161 FAX: (208) 525-7177

EASTERN REGION

MAY 19, 2003

DIRK KEMPTHORNE Governor KARL J. DREHER Director

MARION OLSON 8915 N CHURCH ST CLIFTON ID 83228

RE: WATER DISTRICT #13-R

Dear Mr. Olson:

Your CERTIFICATE OF APPOINTMENT is enclosed herewith. You will, therefore, take charge of the waters of such district and distribute the same in accordance with the law and the decrees of the courts to the various users in such district in accordance with the terms and conditions of their respective rights, and perform such other duties as may be required by the Department of Water Resources, under the laws of the State of Idaho. You are hereby requested to assume your duties at once and continue there at until the necessity therefore shall cease.

Please feel free to call upon this office whenever we can be of assistance to you. We shall have a personal interest in the success of your year's work and desire to keep in as close touch with you as conditions will permit.

Respectfully submitted,

me WAROLD W JONES

Water Rights Supervisor

Enclosure

HWJ:dn

State of Idaho Department of Water Resources Certificate of Appointment	as MARION OLSON as appointed MATER DISTRICT #13-R for of WATER DISTRICT #13-R for of WATER DISTRICT #13-R for of WATER DISTRICT #13-R for of Wattions of Sections 42-605 or until his successor is non as established by applicable law. or until his successor is 19th day of MAY 20 03 1 Director MAY 20 03 0
Departm Certificat	This is to certify that I have on this day appointed MARION OLSON WATERMASTER UATERMASTER Job JIRIGATION SEASON 2003 IRRIGATION SEASON Job Loss Job Just Control Job Laboration setablished by applicable law. Idaho Code, at such rate of compensation as established by applicable law. Iday of One-control Director affixed at B Director Director

PETITION FOR WATERMASTER'S SERVICES

Dxford, Idaho May 15, 2003

Water District No. 13-R RE : Stream: Offord Creek

TO: IDAHO DEPARTMENT OF WATER RESOURCES

I, the undersigned, owner or manager of ditches or person controlling ditches in Water District No. $\underline{/3R}$, hereby request the services of a watermaster for the reason that there is a necessity for the use and control of the waters of the District.

NAME OF WATERMASTER: Marion Olson ADDRESS OF WATERMASTER: 89.15 N. Church St. Clifton Idaho 83228 PHONE NUMBER: 747-3508 Date watermaster is to start: April 1st 2003 If known, the date services of watermaster are to terminate: Mor 1 - 03

nW Hatch Oxford Idah. SF7:5108 ature address telephone

W A R N I N G: Watermaster cannot begin services until ALL conditions of appointment have been fulfilled.

RECEIVED

MAY 1 6 2003

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BEFORE THE DEPARTMENT OF WATER RESOURCES

OF THE

STATE OF IDAHO

STATE OF IDAHO)) ss	OFFICIAL OATH
County of)	

I do solemnly swear (or affirm) that I will support the Constitution of the United States, the Constitution and laws of the State of Idaho, specifically including the provisions of Section 42-605 and 42-607, <u>Idaho Code</u> and that I will faithfully discharge all the duties of the office of <u>Maximum Code</u> Water Master according to the best of my ability. So help me God.

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Principal

SUBSCRIBED AND SWORN to before	e me this 15 day of May , 2003.
OTAP	Man Mark NOTARY PUBLIC Residing at <u>Franklin County</u> Commission Expires <u>1-28-05</u> RECEIVED MAY 16 2003

Gepartment of Water Resources Eastern Region

WD 13-R