



**State of Idaho**

**DEPARTMENT OF WATER RESOURCES**

900 N. Skyline Dr., Suite A • Idaho Falls, Idaho 83402-1718

Phone: (208) 525-7161 • Fax: (208) 525-7177 • Web Site: [www.idwr.idaho.gov](http://www.idwr.idaho.gov)

**EASTERN REGION**

**C. L. "BUTCH" OTTER**  
Governor

**DAVID R. TUTHILL, JR.**  
Director

**April 30, 2008**

**David S. Andreason**  
3794 Little Lost River Hwy.  
Howe, ID 83244

**RE: WATER DISTRICT #33**

**Dear David:**

**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 thereat 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,**

**Dennis Dunn**  
Senior Water Rights Agent

**Enclosure**

**DD:jj**

State of Idaho  
Department of Water Resources

# Certificate of Appointment

This is to certify that I have on this day appointed DAVID S. ANDREASON as  
WATERMASTER of WATER DISTRICT #33 for  
THE 2008 IRRIGATION SEASON 42-605 or until his successor is  
appointed and qualified under the provisions of Sections 42-605  
Idaho Code, at such rate of compensation as established by applicable law.

This certificate has been issued and the seal of the  
Director fixed at Boise, Idaho, this 30TH  
day of APRIL, 2008.

David R. Tuttle  
Director

PETITION FOR WATERMASTER'S SERVICES

Howe, Idaho  
Apr 20, 2008

RE: Water District No. 33  
Stream: Little Lost River

RECEIVED  
APR 25 2008

TO: IDAHO DEPARTMENT OF WATER RESOURCES

Department of Water Resources  
Eastern Region

I, the undersigned, owner or manager of ditches or person controlling ditches in Water District No. 33, 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: David Andreason

ADDRESS OF WATERMASTER: P.O. Box 31  
Howe, Idaho 83244

PHONE NUMBER: 767-3515

Date watermaster is to start: 4-21-08

If known, the date services of watermaster are to terminate: N/A

Donell May 1441 H. 22 Howe Id 867-3441  
signature address telephone

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

BEFORE THE DEPARTMENT OF WATER RESOURCES  
OF THE STATE OF IDAHO

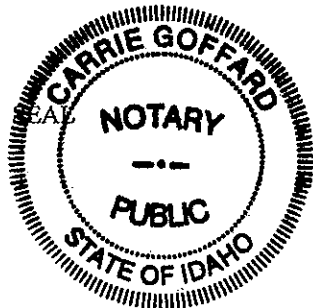
State of Idaho )  
County of Butte ) ss

Official Oath

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, Idaho Code, and that I will faithfully discharge all the duties of the office of Watermaster of District 33 for the 2008 irrigation season or \_\_\_\_\_ calendar year of \_\_\_\_\_ according to the best of my ability. So help me God.

David Anderson  
Watermaster

SUBSCRIBED AND SWORN TO before me this 28<sup>th</sup> day of April, 2008.



Carrie Goffard  
Notary Public  
Residing At Butte Co ID  
Commission Expires 7-27-2012

RECEIVED  
APR 29 2008  
Department of Water Resources  
Eastern Region