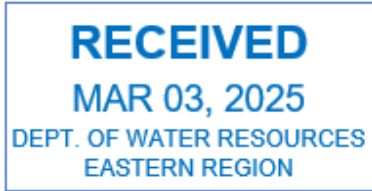


PETITION FOR WATERMASTER'S SERVICES



Soda Springs, ID _____, Idaho
City or County
March 2nd _____, 2025
Date

TO: IDAHO DEPARTMENT OF WATER RESOURCES

RE: Water District No. 11-B
Soda Creek
Water District Name (Stream/Source): _____

I, the undersigned, owner or manager of ditches or person controlling ditches in Water District No. 11-B, hereby request the services of the watermaster for the reason that there is a necessity for the use and control of the waters of the District.

NAME OF WATERMASTER: Trevin Barfuss

Date watermaster services are to start: April 15, 2025

If known, the date watermaster services are to terminate: September 30, 2025

Water User Information:

Bonnie J Barfuss

Printed Name



Signature

PO Box 18 Soda Springs, ID _____ 208-221-7075 bjbarf@ida.net

Address Telephone E-Mail

NOTE: Watermaster cannot begin services until all conditions of his/her appointment have been fulfilled.