



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way, Boise, Idaho 83705-5082 - (208) 334-2190

FAX (208) 334-2348

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

March 7, 2002

Connie Brandau, Watermaster
HC 79 Box 61
Melba, ID 83641

RE: Water District # 57R Reynolds Creek

Dear Mrs. Brandau:

Your Watermaster Oath of Office has been received. Enclosed is your Watermaster Certificate of Appointment.

You will take charge of the water of the district and distribute the same in accordance with the laws of Idaho and decrees of the courts. Distribution shall be in accordance with the terms and conditions of the user's respective rights, and as may be required by the Department of Water Resources. You should note that the enclosed Certificate of Appointment authorizes delivery of natural flow and also stored water pursuant to Section 42-801, Idaho Code.

Please feel free to contact me at our Western Regional Office if you need assistance during the irrigation season, phone 334-2190.

Sincerely,

John Westra
Western Region

Enclosure

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE
STATE OF IDAHO

RECEIVED

MAR 07 2002

WATER RESOURCES
WESTERN REGION

STATE OF IDAHO)
) ss
County of OWYHEE)

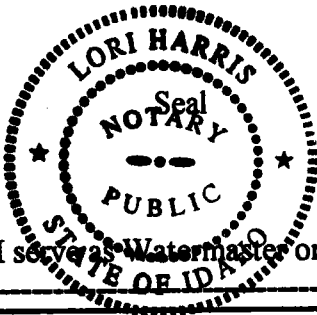
OFFICIAL OATH

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 provision of Section 42-605 and 42-607, Idaho Code and that I will faithfully discharge all the duties of the office

of **Watermaster of** REYNOLDS CREEK WATER DISTRICT #57R according to the best of my ability. So help me God.

Connie M. Brandan
Principal

SUSCRIBED AND SWORN to before me this 7 day of March, 2002



Lori Harris
Notary Public
Residing at Boise, Idaho
Commission Expires 12-8-06

I serve as Watermaster on a year-round basis As called.

PETITION FOR WATERMASTER'S SERVICES

TO: Idaho Department of Water Resources

Date: _____

Water District Name: _____ **District No.:** _____

I the undersigned owner/manager of ditch(s) or person controlling ditches in Water District No. _____ hereby request the services of a watermaster for the reason that there is necessity for the use and control of the waters of the District.

Date Watermaster is to start: _____

If know, the date services of Watermaster are to terminate: _____

Signature

Address

Telephone

Water Right No.

WARNING: Watermaster cannot begin services until all conditions of the appointment have been fulfilled.

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

CERTIFICATE OF APPOINTMENT

This is to certify that I have this day appointed CONNIE BRANDAU as
WATERMASTER of REYNOLDS CREEK WATER DISTRICT 57R for
THE 2002 IRRIGATION SEASON or until his successor is appointed and qualified
under the provisions of Section 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 affixed at Boise, Idaho this 7TH
day of MARCH 2002 XXX

[Signature]