

Sulpher OK Livestock
 PO Box 151
 May Id 83253

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: WD73 4/2/03 Ltr

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Lee's Catherine Watson
 4177 Rd. L
 Orland CA 95963

2. Article Number (Copy from service label)
7000 1670 0013 9130 1508

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Same B. Date of Delivery 4/14/03

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) [Signature] B. Date of Delivery 4/10/03

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: WD73 4/2/03 Ltr

Harley Wallis
 HC 62 Box 2060
 May Id 83253

2. Article Number (Copy from service label)
7000 1670 0013 9130 1546

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Linda K. Hukuh B. Date of Delivery 4-9-03

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: WD73 4/2/03 Ltr

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SENDER: COMPLETE THIS SECTION

1. Article Addressed to: WD73 4/2/03 Ltr

Douglas Pamela Robins
 HC 62 Box 2215
 May Id 83253

2. Article Number (Copy from service label)
7000 1670 0013 9130 1485

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Pam Robins B. Date of Delivery 4/5/03

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) MARY WHITE B. Date of Delivery 4/5/03

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: *DD73 4/2/03 Ltr*

*George Miller
Philip Miller
HC62 Box 2110
May Id 83253*

2. Article Number (Copy from service label)

7000 1670 0013 9130 1522

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *George Miller* B. Date of Delivery *4/5/03*

C. Signature *X George Miller* Agent Addressee

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

TO THE RIGHT OF THE ADDRESS
ORIGINALLY PRINTED
FOR A RECEIPT

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 00173 4/2/03 LR

Gary & Debbie Slominski
HC 62 Box 2085
May Id 83053

2. Article Number (Copy from service label)
7000 1670 0013 9130 1515

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature Agent
X Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 1999

Domestic Return Receipt

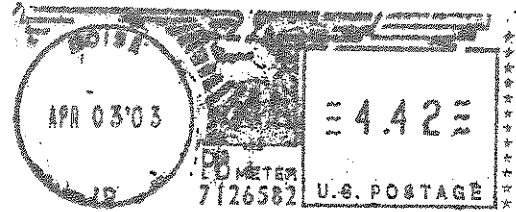
102595-00-M-0952

CERTIFIED MAIL

DEPARTMENT OF WATER RESOURCES
Street, P.O. Box 83720
98



7000 1670 0013 9130 1515



- Not Deliverable As Addressed
- Unable To Forward
- Insufficient Address
- Moved, Left No Address
- Unclaimed Refused
- Attempted - Not Known
- No Such Street Number
- Vacant Single
- No Mail Recipient

RECEIVED
MAY 5 2003
Department of Water Resources

1st NOTICE 4/5/03 ✓
2nd NOTICE 4/15/03 ✓
RETURNED 4/25/03





State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Boise, ID 83706 - P.O. Box 83720, Boise, ID 83720-0098
Phone: (208) 327-7900 Fax: (208) 327-7866 Web Site: www.idwr.state.id.us

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

April 2, 2003

GARY SLOMINSKI
DEBBIE SLOMINSKI
HC 62 BOX 2085
MAY ID 83253

Re: Order Requiring Measuring Devices and Headgates in Water District 73

Dear Water User,

The Idaho Department of Water Resources (Department) issued an order dated November 18, 2002 requiring installation of measuring devices and head gates prior to the 2003 irrigation season for all diversions of water from the Pahsimeroi River and its tributaries. This order required users submit plans of measuring devices and headgates to the Department on or before January 31, 2003. Relative to this requirement, the Department received a copy of a letter to you from the United States Fish and Wildlife Service (FWS), whereby the FWS expresses an interest in working with you on a project to install a fish screen on your diversion along with a properly functioning head gate and measuring device. This letter was sent to six potential Patterson Creek project users and four users relative to the Pahsimeroi River-Furey Lane project. Copies of these letters were attached by several of you to the Water Rights Plan Information Survey sheets in lieu of measuring device and headgate plans, and submitted to the Department in compliance with the January 31 deadline.

It is the Department's understanding that the two FWS projects referenced above will not be completed until sometime later this irrigation season and perhaps after the 2003 irrigation season. The Department understands that you may be using existing diversions included in the above referenced FWS projects this irrigation season before project completion. Although the Department supports the FWS projects, we are concerned that some water users may be out of compliance with the November 18, 2002 order requiring headgates and measuring devices by using existing diversions this year that are scheduled to be replaced under the FWS projects.

This letter is a reminder that all diversions of water from the Pahsimeroi River and tributaries must have acceptable measuring devices and headgates prior to diverting water for the 2003 irrigation season. Eventual replacement of an existing diversion by the FWS does not relieve you from the requirement of installing an adequate headgate and measuring device on that diversion if it is to be used during the 2003 irrigation

season. The Department will provide technical assistance to ensure acceptable interim measurement and headgate systems are in place during this irrigation season for those diversions scheduled for replacement under FWS projects.

If you have questions concerning this issue, please contact Steve Burrell or myself at the above location, or contact Bob Foster, IDWR Salmon Field Office at 208-756-6644.

Respectfully,



for

Tim Luke
Water Distribution Section

Cc: Tamara Wagner, USFWS
Mike Larkin, IDFG
Bob Foster, IDWR, Salmon
IDWR Eastern Region