## WATERMASTER WATER RIGHT PERMIT APPLICATION REVIEW



Application Number: S-89419 DEPARTMENT Applicant's Name: Mark Degner Trust **Evaluation of potential for injury to other water rights:** 1. Would the proposed water allocation have the potential for injury to other water rights? Yes ☐ No 2. If the proposed water allocation will cause injury, can the permit be conditioned to avoid injury? Yes ☐ No □ N/A If "Yes", please list conditions necessary to avoid injury: HC only and use must be measured **Evaluation of appropriate Measurement, Recording and Reporting Condition:** 3. Please select the measurement device(s) required for any permit issued under this application. Totalizing Flow Meter Other/None – please describe below: ☐ Staff Gage A TFM or flow restrictor could be used. Whichever method works best for the situation is allowable. 4. Please select your recommended reporting requirement for any permit issued under this application. Please consider site-specific information, including but not limited to potential for injury to other water rights, regulation history of the area, and level of stakeholder interest in the application. Require recording of volume of water diverted each month and require submission of a report to the Department annually. Do not require recording and reporting at this time. 5. Please provide any additional information or permit conditions that are necessary for this application: None 6. Would you like to review a draft of any permit that might be issued under this application? ☐ No Yes WM name: M. McCord for S. Haynes WM Signature: Michael J M Application Caseworker: Adam Frederick