

**WATERMASTER**  
**WATER RIGHT PERMIT APPLICATION REVIEW**

Application Number: G-19437

Applicant's Name: Sandra Porter



**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:

Source is a hydraulically connected well. A different well that is not hydraulically connected to surface water would be needed to avoid injury.

**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  
Not applicable as the application is being denied.
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:  
n/a
6. Would you like to review a draft of any permit that might be issued under this application?  
 Yes       No

WM name: Robert Wood WM Signature: \_\_\_\_\_ Date: 12/30/2025  
Application Caseworker: Lucinda Vranizan