



WATERMASTER APPLICATION REVIEW

Application #: 589250 Applicant's Name: Carolyn Jones

- 1) Would the proposed allocation have the potential for injury to existing rights?

☐ Yes ☒ No

- 2) If the proposed allocation will cause injury, can it be conditioned to avoid injury?

☐ Yes ☒ No If Yes, please list conditions:

- 3) Have you spoken with persons from other state agencies about this application?

☐ Yes ☒ No If yes, whom and why?

- 4) Please select the appropriate measurement, recording and reporting condition for this application.

☒ **Small** < 0.1 CFS, < 9.2 AF

☐ **Medium** > 0.1 CFS but < 0.25 CFS, > 9.2 AF but < 100 AF

☐ **Large** > 0.25 CFS, > 100 AF

☐ Require a staff gage if source is runoff or if the reservoir is located in-channel.

☐ Require an in-line flow restrictor.

- 5) Please provide any additional information or conditions that you believe are necessary for this application.

Watermaster Name:

NIKKI HENDRICKS

Watermaster Signature:

Nikki Hendricks

Date:

8-25-2022

WRD Caseworker:

Kim French

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