



WATERMASTER APPLICATION REVIEW

Application #:

Applicant's Name:

- 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.

Source is listed as Unnamed Stream. While there would be some winter runoff in this channel, it is also used to convey stockwater for Rock Cr District Improvement Co. patrons. The Rock Cr DIC sources would include Rock Cr, Threemile Cr and North Fork Gate Cr.

Watermaster Name:

Watermaster Signature:

Date:

WRD Caseworker:

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