

NOTICE OF RECEIPT WATER RIGHT APPLICATION

(Pursuant to Section § 85-2-307(1), MCA)

Summarized below are the application details as described in an Application for a Provisional Permit received by the Department of Natural Resources & Conservation on OCTOBER 15, 2020. This notice reflects the application details only as originally submitted. The notice does not reflect changes to the application details made during the review process.

Application Number: 41L 30150126
Owners: HORIZON COLONY INC
PO BOX 819
CUT BANK, MT 59427 0819
Priority Date: OCTOBER 15, 2020 at 12:55 P.M.
Maximum Flow Rate: 50.00 GPM
Maximum Volume: 1.80 AC-FT
Maximum Acres: 4.90
Source Name: UNNAMED TRIBUTARY OF OLD MAIDS COULEE
Source Type: SURFACE WATER

Point of Diversion and Means of Diversion:

<u>ID</u>	<u>Govt Lot</u>	<u>QtrSec</u>	<u>Sec</u>	<u>Twp</u>	<u>Rge</u>	<u>County</u>
1		SWNESW	11	34N	5W	GLACIER

Period of Diversion: JANUARY 1 TO DECEMBER 31

Flow Rate: 50.00 GPM

Diversion Means: INFILTRATION GALLERY

Purpose (Use): LAWN AND GARDEN

Purpose Clarification: LAWN AND GARDEN IRRIGATION

Volume: 1.80 AC-FT

Place of Use:

<u>ID</u>	<u>Acres</u>	<u>Govt Lot</u>	<u>QtrSec</u>	<u>Sec</u>	<u>Twp</u>	<u>Rge</u>	<u>County</u>
1	2.00		NESW	11	34N	5W	GLACIER
2	2.90		SWSW	11	34N	5W	GLACIER
Total:	4.90						

IF ISSUED, THE RIGHT WILL BE SUBJECT TO PRIOR EXISTING WATER RIGHTS.

In general, the department will make a preliminary determination to grant or deny this application within 120 days of the date the application is deemed correct and complete. That date is currently unknown. If the preliminary determination is to grant the application, the application will be published in the local newspaper and a notice will be sent to appropriators who, according to the department records may be affected by the proposed appropriation. Individuals will have 45 days to submit an objection under § 85-2-308, MCA, after the application has been published in the newspaper.

Direct questions regarding this application to the Water Resources Regional Office, 210 SIXTH AVE, PO BOX 1828, HAVRE, MT 59501-1828 PHONE: 406-265-5516 FAX: 406-265-2225.