

**MONTANA WATER COURT  
UPPER MISSOURI DIVISION  
TWO MEDICINE RIVER BASIN 41M  
INTERLOCUTORY DECREE**

**NOTICE OF OBJECTION AND REQUEST FOR HEARING**

1. Claim #: \_\_\_\_\_ 2. County: \_\_\_\_\_  
(One Claim Number Per Form)

3. Page number in Decree: \_\_\_\_\_ 4. Source: \_\_\_\_\_

5. Name of Owner(s) to whom the water right was issued: \_\_\_\_\_

6. Objector's Name, Address, and Phone Number: 7. Objector's Attorney name, address, and phone number:

\_\_\_\_\_  
LAST NAME      FIRST NAME      MID. INITIAL  
\_\_\_\_\_  
STREET ADDRESS OR PO BOX  
\_\_\_\_\_  
CITY                                  STATE      ZIP CODE  
(      )  
\_\_\_\_\_  
PHONE NUMBER                                  E-MAIL

\_\_\_\_\_  
LAST NAME                                  FIRST NAME                                  MID. INITIAL  
\_\_\_\_\_  
STREET ADDRESS OR PO BOX  
\_\_\_\_\_  
CITY    STATE                                  ZIP CODE  
(      )  
\_\_\_\_\_  
PHONE NUMBER                                  E-MAIL

8. Basis of Objection:

- \_\_\_ All Elements
- \_\_\_ Flow Rate/Volume
- \_\_\_ Ownership
- \_\_\_ Period of Diversion/Period of Use
- \_\_\_ Place of Use/Maximum Acres
- \_\_\_ Point of Diversion/Mean of Diversion

- \_\_\_ Priority Date
- \_\_\_ Purpose of Right
- \_\_\_ Source
- \_\_\_ Abandonment/Non-Perfection
- \_\_\_ Other: \_\_\_\_\_

9. State the changes you think should be made to this claim and why. State the specific grounds and evidence on which the Objection is based. (Use additional paper if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATED this \_\_\_\_ day of \_\_\_\_\_, 202\_\_.

\_\_\_\_\_  
SIGNATURE OF OBJECTOR OR OBJECTOR'S ATTORNEY

**(TURN FORM OVER AND COMPLETE OTHER SIDE)**

⇒ You **must** mail a copy of this Objection to all the Owners on the water right. If you are objecting to your own water right and are the sole owner listed on the water right then you do not need to fill out the Certificate of Mailing.

⇒ If you are objecting to your own water right and there are multiple owners on the claim you **must** mail a copy of this Objection to all the other Owners listed on your water right.

⇒ The Certificate of Mailing **must** be completed and mailed **when** filing the original Objection with the Water Court.

### CERTIFICATE OF MAILING

I, \_\_\_\_\_, declare under penalty of perjury, that on the \_\_\_\_ day of  
YOUR NAME  
\_\_\_\_\_, 202\_\_, I mailed a copy of this Objection, postage prepaid, addressed to the following owner(s):

OWNER \_\_\_\_\_

OWNER \_\_\_\_\_

STREET ADDRESS OR PO BOX \_\_\_\_\_

STREET ADDRESS OR PO BOX \_\_\_\_\_

CITY STATE ZIP CODE \_\_\_\_\_

CITY STATE ZIP CODE \_\_\_\_\_

*(Use additional paper if needed for more names & addresses)*

\_\_\_\_\_  
SIGNATURE FOR CERTIFICATE OF MAILING

**Please send this completed original to: Montana Water Court  
PO Box 1389  
Bozeman, MT 59771-1389**

**or E-mail: [watercourt@mt.gov](mailto:watercourt@mt.gov)**

**Questions? Call the Montana Water Court at 1-800-624-3270 or (406) 586-4364.**

**OBJECTIONS MUST BE RECEIVED AT THE WATER COURT  
BY JANUARY 24, 2024.**