

**MONTANA WATER COURT, UPPER MISSOURI DIVISION  
MISSOURI RIVER FROM SUN RIVER TO MARIAS RIVER - BASIN 41Q**

**NOTICE OF OBJECTION AND REQUEST FOR HEARING**

1. Claim #: \_\_\_\_\_ 2. County: \_\_\_\_\_

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 \_\_\_\_\_, 2010.

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

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

⇒ You **must** mail a copy of this Objection to all Owners of the water right.

⇒ 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 other Owners listed on your water right.

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

### CERTIFICATE OF MAILING

I, \_\_\_\_\_, declare under penalty of perjury, that on the \_\_\_\_ day of

YOUR NAME

\_\_\_\_\_, 2010, I mailed a copy of this Objection, postage prepaid, addressed to the

following individual(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**

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

**Fax: (406) 522-4131**

**OBJECTIONS MUST BE RECEIVED AT THE WATER COURT  
BY 5:00 PM ON NOVEMBER 23, 2010.**