

NA



\*FILE\*



\*GROUND WATER CERTIFICATE\*



\*40J \*



\*30152222\*

Current File Location: **RECORDS UNIT**

As of :

Status:

Box Bar Code:

File Bar Code:

10/7/2021

WORK COPY

RECEIVED

Form No. 602 R 12/2016

## NOTICE OF COMPLETION OF GROUNDWATER DEVELOPMENT

Use this form for completed groundwater developments where the water has been put to use for the purposes identified with a maximum use of 35 GPM not to exceed 10 AC-FT per year.

Incomplete forms will be returned.

**Filing Fee \$125.00**

*Make checks payable to DNRC.*

DNRC WATER RESOURCES  
FOR DEPARTMENT USE ONLY  
HAYDEN REGIONAL

MAY 11 2021

Notice No. 30152222 Basin 40J  
Priority Date \_\_\_\_\_ Time 11:30 AM-PM  
Rec'd By AV  
Fee Rec'd \$ 125.00 Check No. 583  
Deposit Receipt # HV52128457  
Payor (if different from name(s) listed in item 1 below) \_\_\_\_\_  
Refund \$ \_\_\_\_\_ Date \_\_\_\_\_  
Deficiency Letter Sent \_\_\_\_\_

- ⇒ Your priority is determined by the date of filing. If it is determined this form was improperly filed, your priority date may be changed.
- ⇒ If your development is within a Controlled Groundwater Area, this form cannot be used. Contact your Regional Office for more information.

1. NAME(S) Angela Childs <sup>430173</sup>  
MAILING ADDRESS 2511 34TH ST SE  
CITY Hayden STATE MT ZIP 59501  
PHONE #: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL 406-399-1904  
EMAIL ADDRESS amoffittis@gmail.com

2. HAS THIS WATER BEEN PUT TO USE FOR THE PURPOSES ON WHICH YOU ARE FILING?  
☒ Yes ☐ No (IF YOU ANSWER NO, YOU CANNOT FILE THIS FORM AT THIS TIME.)

### 3. DIVERSION USED TO OBTAIN GROUNDWATER

- ☒ Well – Attach well log, if available. Water Well Contractor Name: \_\_\_\_\_  
☐ Developed Spring (Excavation performed at the spring location)  
☐ Pit/Pond – Surface Area \_\_\_\_\_ Acres \_\_\_\_\_ Depth \_\_\_\_\_

4. FLOW RATE USED 35 GPM (Cannot Exceed 35 GPM)

### 5. COMBINATION OR SHARED DEVELOPMENT

a. Are there other groundwater developments on your property? ☐ Yes ☒ No  
If yes, how far away are the existing groundwater developments from this new groundwater development?  
Provide a DNRC water right number for each.

\_\_\_\_\_

b. Is this development used for another water right or by another user? ☐ Yes ☒ No  
If yes, please explain how and provide a DNRC water right number for each.

\_\_\_\_\_

### 6. PURPOSE AND PERIOD OF USE: Check those that apply and answer applicable questions

☒ **Domestic:** Number of homes supplied: 1  
Year round use? ☒ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

WORK COPY



# WORK COPY

☒ **Lawn & Garden:** Include only watered area. Do not include house footprint, driveway, graveled areas, etc.  
Total size of lawn & garden - length x width \_\_\_\_\_ -OR- Number of Acres 3  
April 1 - October 31 ☒ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

☐ **Irrigation:** (Do not include Lawn & Garden Irrigation)  
Type of crop \_\_\_\_\_ Total Crop Acres Irrigated \_\_\_\_\_  
April 1 - October 31 ☐ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

☒ **Stock:**  
Number & type: (Ex: 100 Cows & 1 Horse) Horse 10  
Year round use? ☒ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

☐ **Other:** (Do not include purposes described above)  
Describe the purpose of the use \_\_\_\_\_  
Amount of water used \_\_\_\_\_ gallons per day Number of days used \_\_\_\_\_  
Year round use? ☐ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

## 7. POINT OF DIVERSION - Location of the groundwater development

*per Cadastral 4N-8621*  
NW 1/4 NW 1/4 NW 1/4 of Section 22 Township 32 ☒ N ☐ S Range 16 ☒ E ☐ W  
County Hill Tract # 1 COS # \_\_\_\_\_ Gov't Lot # 4  
Subdivision Name Saddle Butte #2 Lot 4 Block 1  
Street Address, including City/State/Zip Code 2511 34th St SE Havre MT

## 8. PLACE OF USE - Enter the 17 digit geocode(s) applicable to the place of use legal land description.

Geocodes can be found in county records, tax statements, or at <http://svc.mt.gov/msl/mtcadastral/>.

Geocode: 124441-22-3-05-04-0000

IS THE PLACE WHERE WATER IS USED THE SAME AS THE POINT OF DIVERSION? ☒ Yes ☐ No

If no, enter the place of use land description below. Attach additional sheets if necessary.

\_\_\_\_ 1/4 \_\_\_\_ 1/4 \_\_\_\_ 1/4 of Section \_\_\_\_ Township \_\_\_\_ ☐ N ☐ S Range \_\_\_\_ ☐ E ☐ W  
County \_\_\_\_\_ Tract # \_\_\_\_\_ COS # \_\_\_\_\_ Gov't Lot # \_\_\_\_\_  
Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_  
Street Address, including City/State/Zip Code \_\_\_\_\_

## 9. AFFIDAVIT OF OWNERSHIP OR WRITTEN CONSENT

I have possessory interest in the property where the water has been put to beneficial use and I have the exclusive property rights in the groundwater development works **OR** I have attached written consent of the person owning the groundwater development works and/or written notification to the land owner pursuant to MCA 85-2-306(1).

**\*\*Please note, you must submit ORIGINAL owner signatures, copies will not be accepted.\*\***

I declare under penalty of perjury & under the laws of the State of Montana that the foregoing is true & correct.

Printed Name\*\* Angela E Childs

Applicant Signature [Signature] Date: 5/11/21

Printed Name\*\* \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Visit <http://dnrc.mt.gov/divisions/water> for additional water right related information.



WORK COPY

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MAY 11 2021

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HAYDEN REGIONAL  
FOR DEPARTMENT USE ONLY

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Deposit Receipt # HVS2128457  
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1. NAME(S) Angela Childs <sup>420173</sup>  
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PHONE #: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL 406-399-1904  
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- ☒ Well – Attach well log, if available. Water Well Contractor Name: \_\_\_\_\_  
☐ Developed Spring (Excavation performed at the spring location)  
☐ Pit/Pond – Surface Area \_\_\_\_\_ Acres \_\_\_\_\_ Depth \_\_\_\_\_

## 4. FLOW RATE USED 35 GPM (Cannot Exceed 35 GPM)

## 5. COMBINATION OR SHARED DEVELOPMENT

- a. Are there other groundwater developments on your property? ☐ Yes ☒ No  
If yes, how far away are the existing groundwater developments from this new groundwater development?  
Provide a DNRC water right number for each.
- \_\_\_\_\_
- \_\_\_\_\_

- b. Is this development used for another water right or by another user? ☐ Yes ☒ No  
If yes, please explain how and provide a DNRC water right number for each.
- \_\_\_\_\_
- \_\_\_\_\_

## 6. PURPOSE AND PERIOD OF USE: Check those that apply and answer applicable questions

- ☒ **Domestic:** Number of homes supplied: 1  
Year round use? ☒ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.



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Total size of lawn & garden - length x width \_\_\_\_\_ -OR- Number of Acres 3  
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Type of crop \_\_\_\_\_ Total Crop Acres Irrigated \_\_\_\_\_  
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☒ **Stock:**

Number & type: (Ex: 100 Cows & 1 Horse) Horse 10  
 Year round use? ☒ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

☐ **Other:** (Do not include purposes described above)

Describe the purpose of the use \_\_\_\_\_  
 Amount of water used \_\_\_\_\_ gallons per day Number of days used \_\_\_\_\_  
 Year round use? ☐ Yes ☐ No If no, from \_\_\_\_\_ to \_\_\_\_\_, inclusive of each year.

**7. POINT OF DIVERSION** - Location of the groundwater development

NW 1/4 NW 1/4 \_\_\_\_\_ 1/4 of Section 22 Township 32 ☒ N ☐ S Range 16 ☒ E ☐ W  
 County Hill Tract # 1 COS # \_\_\_\_\_ Gov't Lot # 4  
 Subdivision Name Saddle Butte #2 Lot 4 Block 1  
 Street Address, including City/State/Zip Code 2511 34th St SE Havre MT

**8. PLACE OF USE** - Enter the 17 digit geocode(s) applicable to the place of use legal land description.

Geocodes can be found in county records, tax statements, or at <http://svc.mt.gov/msl/mtcadastral/>.

Geocode: 124441-22-3-05-04-0000

**IS THE PLACE WHERE WATER IS USED THE SAME AS THE POINT OF DIVERSION?** ☒ Yes ☐ No

If no, enter the place of use land description below. Attach additional sheets if necessary.

\_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Township \_\_\_\_\_ ☐ N ☐ S Range \_\_\_\_\_ ☐ E ☐ W  
 County \_\_\_\_\_ Tract # \_\_\_\_\_ COS # \_\_\_\_\_ Gov't Lot # \_\_\_\_\_  
 Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_  
 Street Address, including City/State/Zip Code \_\_\_\_\_

**9. AFFIDAVIT OF OWNERSHIP OR WRITTEN CONSENT**

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**\*\*Please note, you must submit ORIGINAL owner signatures, copies will not be accepted.\*\***

I declare under penalty of perjury & under the laws of the State of Montana that the foregoing is true & correct.

Printed Name\*\*

Applicant Signature

Date: 5/11/21

Printed Name\*\*

Applicant Signature

Date: \_\_\_\_\_

Visit <http://dnrc.mt.gov/divisions/water> for additional water right related information.



**FORM 602**  
***CORRECT AND COMPLETE REVIEW***  
***FOR THE FORM DATED 01/2015 or later***

All corrections or changes made by DNRC shall include the date and the initials of the person making the change. Use this form as a checklist and documentation that the form is considered correct and complete. **Any forms dated prior to 01/2015 will not be accepted.** They will be returned with a deficiency letter and the most recent version of the 602. Obtain the version from the Internet.

**MAP:** A map is not required. However, if a map is included and the required information is on the map, DNRC will confirm the written land description matches the map. If it does not, DNRC will change the written description to match the map. If a map is submitted, but does not have the required information, mark a large X across the map so that it is known the map was not used.

☒ **Fee.**

Correct and complete will be that the fee of \$125.00 was submitted with the form.

☒ **Item 1. Name/Address**

Correct and complete will be that a name and address is provided.

☒ **Item 2. Put to Use?**

If no is checked, terminate the form and refund the fee. If yes is checked, proceed. If no box is checked, get confirmation from the owner, cadastral, or Orion that water has been put to use prior to proceeding.

☒ **Item 3. Diversion Used**

If no box is checked, but DNRC can determine the type of diversion by other information contained on the form, DNRC will check the appropriate box. Correct and complete will be that a box is checked. Item 3 will be correct and complete if pit is checked and the surface area and depth are identified. The well driller name does not need to be completed.

☒ **Item 4. Flow Rate Used**

Correct and complete will be that a flow rate is identified and the flow rate is 35 gpm or less.

☒ **Item 5. Combination or Shared Well**

Correct and complete will be that yes or no has been checked on each question. If yes, an explanation must be entered.

☒ **Item 6. Purpose and Period of Use**

If no box is checked, but DNRC can determine the purpose by other information contained on the form, DNRC will check the appropriate box. Correct and complete will be that at least one box is checked and the information required to determine the volume is provided. If the period of use is not checked, DNRC will use the standard time period displayed. If water is used for a non-standard purpose, make sure the owner has provided substantial credible information to prove the volume. This is especially important for wildlife and recreation uses. Refer to the 602 processing manual for more information on what is reasonable justification.

☒ **Item 7. Point of Diversion**

Correct and complete will be:

1. ¼¼ section, section, township and range (40 acre description);
2. Lot, Block, Subdivision, ¼ section, section township and range;
3. Government Lot, ¼ section, section, township and range; **or**
4. Certificate of Survey No. with or without a lot number, ¼ section, section, township and range.

Street or Road Address: Correct and complete will be whatever is entered. DNRC will not confirm the accuracy of the information.

☒ **Item 8. Place of Use**

Correct and complete will be the same as POD, except that geocode must be provided as well.

☒ **Item 9. Affidavit of Ownership or Written Consent**

If the statements are correct, sign the form. Correct and complete will be that the form is signed.

REVIEWER

*Jamie Karp*

DATE

*8-6-21*



STATE OF MONTANA  
DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
1424 9TH AVENUE P.O.BOX 201601 HELENA, MONTANA 59620-1601

CERTIFICATE OF WATER RIGHT

UPON FINDING THE REQUIREMENTS OF SECTION 85-2-306, MCA, HAVE BEEN MET, THIS  
CERTIFICATE OF WATER RIGHT IS GRANTED.

Water Right Number: 40J 30152222 GROUND WATER CERTIFICATE  
Version: 1 -- ORIGINAL RIGHT  
Version Status: ACTIVE

Owners: ANGELA CHILDS  
2511 34TH ST SE  
HAVRE, MT 59501-8102  
Priority Date: MAY 11, 2021 at 11:30 A.M.  
Enforceable Priority Date: MAY 11, 2021 at 11:30 A.M.

Purpose (use): DOMESTIC  
LAWN AND GARDEN  
STOCK

Maximum Flow Rate: 35.00 GPM  
Maximum Volume: 8.76 AC-FT  
Maximum Acres: 3.00  
Source Name: GROUNDWATER  
Source Type: GROUNDWATER

Point of Diversion and Means of Diversion:

ID	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1		NWNWNW	22	32N	16E	HILL

Period of Diversion: JANUARY 1 TO DECEMBER 31

Source Name: GROUNDWATER  
Diversion Means: WELL  
Subdivision: SADDLE BUTTE ESTATES 2ND ADD TRACT/LOT: 4 BLOCK: 1  
Survey Tract: 1  
Well Depth: 180.00 FEET  
Static Water Level: 74.00 FEET  
Casing Diameter: 6.60 INCHES  
Well Location: 2511 34TH ST SE

Purpose (Use): DOMESTIC  
Households: 1  
Volume: 1.00 AC-FT  
Period of Use: JANUARY 1 to DECEMBER 31  
Place of Use:

ID	Acres	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1			NWNWNW	22	32N	16E	HILL

Subdivision: SADDLE BUTTE ESTATES 2ND ADD

Purpose (Use): LAWN AND GARDEN  
Volume: 7.50 AC-FT  
Period of Use: APRIL 1 to OCTOBER 31  
Place of Use:

ID	Acres	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1	3.00		NWNWNW	22	32N	16E	HILL

Subdivision: SADDLE BUTTE ESTATES 2ND ADD

Total: 3.00

Purpose (Use): STOCK  
Volume: 0.26 AC-FT  
Period of Use: JANUARY 1 to DECEMBER 31  
Place of Use:

ID	Acres	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1			NWNWNW	22	32N	16E	HILL

Subdivision: SADDLE BUTTE ESTATES 2ND ADD

THE PLACE OF USE IS LOCATED IN TRACT 1.

**BACKFLOW PREVENTOR**

PURSUANT TO SECTION 85-2-505, MCA, TO PREVENT GROUND WATER CONTAMINATION, AN OPERATIONAL BACKFLOW PREVENTOR MUST BE INSTALLED AND MAINTAINED BY THE APPROPRIATOR IF A CHEMICAL OR FERTILIZER DISTRIBUTION SYSTEM IS CONNECTED TO THE DIVERSION MEANS.

THIS CERTIFICATE IS SUBJECT TO ALL PRIOR EXISTING WATER RIGHTS  
IN THE SOURCE OF SUPPLY.

FAILURE TO COMPLY WITH ANY OF THESE TERMS AND CONDITIONS MAY RESULT IN THE LOSS OF THIS  
CERTIFICATE OF WATER RIGHT.

  
Witness Signature

  
Water Resources Division

DATE ISSUED: AUGUST 6, 2021



Well ID#

For fields that are not applicable, enter NA. Optional fields have a grayed background. Record additional information in the REMARKS section.

**DNRC COPY**



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**Filing Fee \$125.00****FOR DEPARTMENT USE ONLY**

Notice No. \_\_\_\_\_ Basin \_\_\_\_\_  
Priority Date \_\_\_\_\_ Time \_\_\_\_\_ AM - PM  
Rec'd By \_\_\_\_\_  
Fee Rec'd \$ \_\_\_\_\_ Check No. \_\_\_\_\_  
Deposit Receipt # \_\_\_\_\_  
Payor (if different from name(s) listed in item 1 below) \_\_\_\_\_  
Refund \$ \_\_\_\_\_ Date \_\_\_\_\_

- ⇒ Go to web site <http://www.dnrc.mt.gov/wrd/> to learn additional information about the use of this form.  
⇒ Your priority is determined by the date of filing. If it is determined this form was improperly filed, your priority date may be changed.  
⇒ If your development is within a Controlled Ground Water Area, the regional office will contact you to explain the correct filing requirements.

1. NAME Angela Childs  
MAILING ADDRESS 2511 34th St SE  
CITY Haute STATE MT ZIP 59501  
WORK PHONE \_\_\_\_\_ HOME PHONE 406-399-1904 CELL PHONE 406-399-1904

**2. DIVERSION USED TO OBTAIN GROUNDWATER**

- ☐ Well - Attach well log, if available Water Well Contractor Name: \_\_\_\_\_  
☐ Developed Spring (Excavation performed at the spring location.)  
☐ Pit/Pond - Surface Area \_\_\_\_\_ Acres \_\_\_\_\_ Depth \_\_\_\_\_

**3. FLOW RATE USED \_\_\_\_\_ GPM****4. COMBINATION OR SHARED DEVELOPMENT**

- a. Will this development be used in combination with another well or spring? ☐ Yes ☐ No  
b. Will this development be shared by other users? ☐ Yes ☐ No  
If yes for either question, list the water right numbers and explain how the development is used. \_\_\_\_\_

**5. PURPOSE AND PERIOD OF USE**

<b>Domestic</b>	Number of homes supplied _____ Year round use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
<b>Irrigation</b> (Area Watered)	Total Size of lawn and/or garden - length x width _____ Crop Acres Watered _____ Type of crop _____ Total Crop Acres Irrigated _____ April 1 - October 31 <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
<b>Stock</b> (Example: 100 Cows & 1 Horse)	Number and type _____ Year round use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
<b>Other</b>	Describe the purpose of the use _____ Amount of water used _____ gallons per day Number of days used _____ Year round use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.

**6. POINT OF DIVERSION - Location of Ground water Development**

\_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 Section \_\_\_\_\_ Twp \_\_\_\_\_ N / S Rge \_\_\_\_\_ E / W County \_\_\_\_\_  
Lot \_\_\_\_\_ Block \_\_\_\_\_ Tract No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Government Lot No. \_\_\_\_\_ COS No. \_\_\_\_\_  
Street or Road Address, including City, State & Zip Code of the Development \_\_\_\_\_

**7. PLACE OF USE - Enter the 17 digit geocode applicable to the place of use legal land description. \_\_\_\_\_ If there are multiple places of use, attach additional sheets and list the geocode for each legal land description. The geocodes can be found in county records.**

Is the place where water is used the same as the point of diversion? ☐ Yes ☐ No  
If no, enter the place of use land description below. Attach additional sheets if necessary.  
☐ Domestic ☐ Stock ☐ Irrigation ☐ Other  
\_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 Section \_\_\_\_\_ Twp \_\_\_\_\_ N / S Rge \_\_\_\_\_ E / W County \_\_\_\_\_  
Lot \_\_\_\_\_ Block \_\_\_\_\_ Tract No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
Government Lot No. \_\_\_\_\_ COS No. \_\_\_\_\_  
Street or Road Address, including City, State & Zip Code of the Place of Use \_\_\_\_\_

**8. AFFIDAVIT OF OWNERSHIP OR WRITTEN CONSENT**

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The statements appearing here are to the best of my knowledge true and correct.

Appropriator's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_

