## NOTICE OF INTENT TO APPEAR FORM

(name of party or pa	articipant) Division of Water Rights Prosecution Team plans	to participate in t	he water right
hearing regarding th	ne	,	
(name of responden	at and enforcement action) Administrative Civil Liat	oility Complaint upon (	Dity of Adelanto
	scheduled to commence on February 13, or March 10, 201	7	
	,	-	
2	(1) of the following two boxes:		
	inticipate by cross-examination or rebuttal only	" "	
	the following witnesses to testify at the hearin on, and rebuttal.) (At least one (1) row of Ta	w " "	· · · · · · · · · · · · · · · · · · ·
	is box is checked.)		oc aday
NAME	SUBJECT OF PROPOSED TESTIMONY	ESTIMATED	EXPERT
	SOBJECT OF PROPOSED IESTMEONI	LENGTH OF	WITNESS
		DIRECT TESTIMONY	(YES/NO)
		I ES I HBOAT	
Kathy Mrowka	Key Issues 1, 2, and 3	10	Yes
TED	The Prosecution Team will call rebuttal witnesses as mecessary		
		THE CAMPAGE TO SERVICE AND ADDRESS OF THE SERVIC	
(If more space is red	uired, please add additional pages.)		
2) Fill in the follow	ing information of the Porticipant Ports	Manner of Other	
Representative:	ving information of the Participant, Party, <i>I</i> :	auomey, or om	<b>ar</b>
	): John J. Prager, Attorney		
Mailing Address: Of	fice of Enforcement, State Water I	Resources Co	ontrol Board
	23rd Floor, Sacramento, Calif		
Phone Number: 91	6 341 5542 Fax Number:	916 341 589	<del>)</del> 6
E-mail Address: Jo	hn.Prager@waterboards.ca.go	V	
Intional-			
Optional:	tronic service of hearing-related materials.		
<del></del>			
1	11-72 D	ated: 2/10/20	17
oignature:		##ed:	

## NOTICE OF INTENT TO APPEAR FORM

(name of party or parti	cipant) Division of Water Rights Prosecution Team plans	to participate in th	he water riight
hearing regarding the			
(name of respondent a	and enforcement action) Administrative Civil Liabili	ity Complaint upon Red	wood Park CSD
Baneraus, our a southern amount of	And the control of the control of the control of		
	scheduled to commence on	_	
	February 13, or March 10, 201	•	
1) Check only one (	1) of the following two boxes:		
	cipate by cross-examination or rebuttal only	y. (Includes open	ing statement.)
	e following witnesses to testify at the hearin	~ "	-
	, and rebuttal.) (At least one (1) row of Ta	ible below must	be fully
completed if this	BOX IS CHECKEL)		
NAME	SUBJECT OF PROPOSED TESTIMONY	ESTIMATED LENGTH OF DIRECT	EXPERT WITNESS (YES/NO)
		TESTIMONY	
Kathy Mrowka	Key Issues 1, 2, and 3	10	Yes
TBD	The Prosecution Team will call rebuttal witnesses as necessary		
		With the second	
(If more space is requi	ired, please add additional pages.)		
Representative:	ng information of the Participant, Party, I John J. Prager, Attorney	Attorney, or Oth	er ·
	ce of Enforcement, State Water I	Resources Co	ontrol Board
	23rd Floor, Sacramento, Calif		
Phone Number 916	341 5542 Fax Number:	916 341 589	96
E-mail Address: Joh	n.Prager@waterboards.ca.ge	OV	
- The second sec	~		
Optional:    I/we decline electrons	onic service of hearing-related materials.		
Signature:		ated: 2/10/20	17
AND REPORT OF			

## NOTICE OF INTENT TO APPEAR FORM

(name of party or parti	cipant) Division of Water Rights Prosecution Team plans	to participate in th	he water right
hearing regarding the			
(name of respondent a	and enforcement action) Administrative Civil L	iability Complaint up	on Jasbir Gill
	scheduled to commence on		
	February 13, or March 10, 201		
2	1) of the following two boxes:		
	cipate by cross-examination or rebuttal on	- "	
	e following witnesses to testify at the hearin , and rebuttal.) (At least one (1) row of Ta	- n	
completed if this			
NAME	SUBJECT OF PROPOSED TESTIMONY	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
Katihy Mrowka	Key Issues 1, 2, and 3	110	Yes
TBD	The Prosecution Team will call rebuttal witnesses as necessary		
		4-10-10-10-10-10-10-10-10-10-10-10-10-10-	
Of more space is requi	ired, please add additional pages.)		1
Representative:	John J. Prager, Attorney	Attorney, or Othe	ef
Mailing Address: Office	ce of Enforcement, State Water	Resources Co	ontrol Board
801 K Street, 2	23rd Floor, Sacramento, Cali	fornia 95814	1
Phone Number: 916	341 5542 Fax Number:	916 341 589	96
E-mail Address: Joh	n.Prager@waterboards.ca.g	OV	
	onic service of hearing-related materials.		
Signature:	LJ.Z.	ated: 2/10/20	17