



IDAHO DEPARTMENT OF  
**WATER RESOURCES**

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098

Phone: 208-287-4800 • Fax: 208-287-6700 • Email: [idwrinfo@idwr.idaho.gov](mailto:idwrinfo@idwr.idaho.gov) • Website: [idwr.idaho.gov](http://idwr.idaho.gov)

Governor Brad Little

Director Gary Spackman

September 9, 2022

JEFFEREY FAUTT  
903 E PUGH POINT CT  
HARRISON ID 83833-4400

**PROOF WITHDRAWAL ACKNOWLEDGEMENT LETTER**

**RE: Permit No. 95-17320**

Dear Permit Holder:

The Department acknowledges your request to withdraw the proof of beneficial use form (proof) submitted for the above referenced permit. A refund of \$50 has been requested payable to United Crown Pump & Drilling and will arrive under separate cover from the State Controller's Office.

**Please be advised that Idaho Code § 42-248, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at [www.idwr.idaho.gov](http://www.idwr.idaho.gov).**

If you have any questions, please contact me at (208) 287-4920 or [debby.judd@idwr.idaho.gov](mailto:debby.judd@idwr.idaho.gov).

Sincerely,

Debby Judd  
Technical Records Specialist

Enclosures

c: UNITED CROWN PUMP AND DRILLING – *via email*

**Judd, Debbi**

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**From:** Braden Agueros <braden@unitedcrown.com>  
**Sent:** Thursday, September 1, 2022 4:18 PM  
**To:** Judd, Debbi  
**Cc:** 'Richard Agueros'; Trisha Agueros  
**Subject:** Permit No. 95-17320 Proof of Beneficial Use Retraction for Fautt

**CAUTION:** This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

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Debbi,

Thank you for clarifying that Fautt (Permit No. 95-17320) had already submitted an extension. As we were unaware of their prior submittal, please treat this email as a retraction request for our submitted Proof of Beneficial Use and the corresponding \$50.00 fee on their behalf.

Any return mail or items can be made out to:

United Crown Pump & Drilling  
3125 W. Hayden Ave  
Hayden, ID 83835

If you have any questions, please feel free to call me (208) 771-1583.  
Thank you for your time.

Best,

**BRADEN AGUEROS, J.D.**



## Judd, Debbi

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**From:** Judd, Debbi  
**Sent:** Wednesday, September 7, 2022 12:26 PM  
**To:** IdwrPayable  
**Subject:** Refund request

TO: Fiscal

FROM: Debbi Judd

DATE: September 7, 2022

**RE: Refund: Proof of Beneficial Use**

Please refund \$50. Proof was withdrawn.

NAME: UNITED CROWN PUMP & DRILLING

ADDRESS: 3125 W HAYDEN AVE  
HAYDEN ID 83835-8013

RECEIPT #: C113887

Thank you.  
Debbi

Debbi Judd  
Technical Records Specialist  
[debbi.judd@idwr.idaho.gov](mailto:debbi.judd@idwr.idaho.gov)

Idaho Department of Water Resources  
322 E Front St  
PO Box 83720  
Boise, ID 83720-0098  
208-287-4920  
[www.idwr.idaho.gov](http://www.idwr.idaho.gov)

RECEIVED

SEP 01 2022

DEPARTMENT OF  
WATER RESOURCESSTATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**STATEMENT OF COMPLETION**  
FOR SUBMITTING PROOF OF BENEFICIAL USE

| FOR OFFICE USE ONLY |         |
|---------------------|---------|
| Amt. of Fee \$      | 50.00   |
| Receipt No.         | 2713887 |
| Received By         | KA      |
| Date Received       | 9.1.22  |

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been **completed** and that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner.** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, contact any Department office or visit the Department's website at [idwr.idaho.gov](http://idwr.idaho.gov) for an *Assignment of Permit* form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

1. Permit No. 95-17320 Telephone No. 2087727867
2. Name of Permit Holder(s) Jefferey Fautt
3. Mailing Address 55 Kemline Ct City Alamo  
State CA Zip 94507 Email ragueros@unitedcrown.com
4. Source of Water Coeur d'Alene If **GROUND WATER** (well), Date Drilled mo. n/a / yr. n/a  
Well Driller n/a Drilling Permit Number n/a
5. Extent of use(s) completed **as authorized by the water right permit:**  
Domestic (No. of households) n/a Stockwater (No. and type of stock) n/a  
Irrigation (No. of acres) 2.50 Other n/a
6. Total rate of diversion or storage volume for which proof is submitted .14 cfs OR          acre-feet.

7. Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of permit: Refer to the approval conditions on your permit and respond accordingly.

**The Department will not issue a license if permit conditions are not met.**

|                             |                                                                |                                         |                                        |
|-----------------------------|----------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| Measuring Device            | <b>Is a measuring device required?</b>                         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|                             | <b>If yes, has the measuring device been installed?</b>        | Yes <input type="checkbox"/>            | No <input type="checkbox"/>            |
| Lockable Controlling Device | <b>Is a lockable device required to control the diversion?</b> | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|                             | <b>If yes, has the lockable device been installed?</b>         | Yes <input type="checkbox"/>            | No <input type="checkbox"/>            |
| Fish Screen                 | <b>Is a fish screen required?</b>                              | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | <b>If yes, has the fish screen been installed?</b>             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |

**Other Conditions of Permit**

Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.

n/a Completed? Yes ☐ No ☐

8. Fee Enclosed \$ 50 or not applicable ☐. See fee schedule on page 2 of the instructions.  
Proof statements filed without an appropriate fee, will be considered incomplete.
9. Person to contact to accompany the Department representative during field examination of the water system.

Name Braden Agueros Telephone Number 2087711583  
Mailing Address 3125 W Hayden Ave City Hayden  
State ID Zip 83835 Email braden@unitedcrown.com

**The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.**

Signature of Permit Holder  **REPRESENTATIVE** Date 8.29.22  
(Include your title, if on behalf of company or organization)

May, 2017

To Whom It May Concern:

We, Jeffrey Fautt, have secured the services of United Crown Pump & Drilling to assist in the process of acquiring water rights. By this letter we authorize Rich Agueros or Bob Haynes to sign our application and provide additional information to the Department of Resources, Department of Lands, or Corps of Engineers which may be required to complete the application for permit.

Sincerely,

Jeffrey Fautt, owner  
Name Title

RECEIVED

AUG 15 2022

DEPARTMENT OF  
WATER RESOURCESSTATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**STATEMENT OF COMPLETION**  
FOR SUBMITTING PROOF OF BENEFICIAL USE

## FOR OFFICE USE ONLY

Amt. of Fee \$ \_\_\_\_\_

Receipt No. \_\_\_\_\_

Received By \_\_\_\_\_

Date Received \_\_\_\_\_

The Idaho Department of Water Resources (Department) considers this form a statement that the permit holder(s) applied water to beneficial use and completed development of a water right to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner (CWRE).** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, complete a Notice of Change in Water Right Ownership form. If you wish to relinquish your permit because you have not established the authorized water use and are not applying for an extension, please notify the Department in writing. *sfault@faulthomes.com*

1. Permit No. 95-17320 Name of Permit Holder(s) Jefferey Fault  
Telephone No. 925-640-4803 Email jfault@faulthomes.com  
Mailing Address 903 E. Rugh Pt Ct City Hamman State ID Zip 83833

2. Source of Water lake If Ground Water (well), Date Drilled mo. \_\_\_\_\_ / yr. \_\_\_\_\_  
Drilling Permit/Tag No. N/A Drilling Company's Name \_\_\_\_\_

## 3. Extent of use(s) completed as authorized by the water right permit:

Domestic (No. households) \_\_\_\_\_ Irrigation (No. acres) 6 Stockwater (No. and stock type) \_\_\_\_\_  
Other \_\_\_\_\_

4. Total diversion rate or volume (storage only) for which proof is submitted N/A cfs OR \_\_\_\_\_ af  
If the total developed water use is 5 acres of irrigation or less, is stockwater storage of 14.6 acre-feet or less, or has a diversion rate of less than 0.24 cfs, attach a map of the place of use and point of diversion and photographs showing beneficial use.

5. Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)

lake pump, serving in-ground irrigation system

6. Permit condition compliance. Refer to the permit approval conditions and check all the items required, then check "Yes" or "No" to indicate whether the required items were established, submitted, and/or installed:

Required? Yes ☐ No ☒ (If "Yes", attach required data, evidence of compliance, or evidence of installation)

☐ ☒ Ground water level data, pumping information, or other diversion data

☐ ☒ Mitigation plan

☐ ☒ Lockable controlling works

☐ ☒ Measuring device

☐ ☒ Fish screen

☐ ☒ Other requirements of the water right permit \_\_\_\_\_

☐ ☒ Reasonably Anticipated Future Needs ("RAFN") Municipal use

If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No

7. Fee Enclosed \$ 1500 or ☐ CWRE field report attached or ☒ No fee required  
See fee schedule on page 3 of the instructions. Proof statements filed without an appropriate fee are incomplete.

8. Person to contact to accompany a Department representative during the field examination of the water system:

Name: Jefferey Fault Telephone No. \_\_\_\_\_ Email \_\_\_\_\_  
Mailing Address 903 E. Rugh Pt Ct City Hamman State ID Zip 83833

The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Jeff Fault  
SIGNATURE OF PERMIT HOLDER\*

Jefferey Fault-owner  
PRINTED NAME AND TITLE

8/9/22  
DATE

\*Attach power of attorney if completing on behalf of permit holder.