

RECEIVED

Form 2-217 Rev. 9/21

FEB 17 2022

DEPARTMENT OF  
WATER RESOURCES

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.00

Receipt No. N038382

Received By JA

Date Received 2-14-22

FEB 14 2022

IDWR / NORTH

## STATEMENT OF COMPLETION

FOR SUBMITTING PROOF OF BENEFICIAL USE

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 an Assignment of Permit 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.

1. Permit No. 96-9860 Name of Permit Holder(s) OTTS Basin Homeowners Assn.

Telephone No. (559) 799-3552 Email ottsbasinHOA@gmail.com

Mailing Address P.O. Box 1212 City Sagle State ID Zip 83860

2. Source of Water Ground water If Ground Water (well), Date Drilled mo. \_\_\_\_ / yr. \_\_\_\_

Drilling Permit/Tag No. \_\_\_\_ Drilling Company's Name \_\_\_\_

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

Domestic (No. households) 15 Irrigation (No. acres) \_\_\_\_ Stockwater (No. and stock type) \_\_\_\_

Other \_\_\_\_

4. Total diversion rate or volume (storage only) for which proof is submitted 0.18 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.)

existing well with existing line and stub lines

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)

- |                          |                                     |                                                                       |
|--------------------------|-------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Ground water level data, pumping information, or other diversion data |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Mitigation plan                                                       |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Lockable controlling works                                            |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Measuring device                                                      |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Fish screen                                                           |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other requirements of the water right permit                          |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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 \$ 50 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: Dyan Silsby Telephone No. (559) 799-3552 Email dyan@1791.com

Mailing Address P.O. Box 1212 City Sagle State ID Zip 83860

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.

Dyan Silsby  
SIGNATURE OF PERMIT HOLDER\*

officer - Secretary  
PRINTED NAME AND TITLE

2/14/22  
DATE

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



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

February 22, 2022

OTTS BASIN HOMEOWNERS ASSN  
PO BOX 1212  
SAGLE ID 83860-1212

**PROOF ACKNOWLEDGEMENT LETTER**

**RE: Permit No. 96-9860**

Dear Permit Holder:

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

**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 concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Debbi Judd  
Technical Records Specialist

Enclosures