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Form 42-217 Rev. 9/21

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JAN 04 2022

DEPARTMENT OF  
WATER RESOURCES

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

IDWR / NORTH

## STATEMENT OF COMPLETION

FOR SUBMITTING PROOF OF BENEFICIAL USE

## FOR OFFICE USE ONLY

Amt. of Fee \$ 0

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

Received By Ja

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 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.

- Permit No. 95-18144 Name of Permit Holder(s) Jennifer HIGA, BYRON HIGA  
 Telephone No. 208-304-5024 Email HARRYDOG481@gmail.com  
 Mailing Address P.O. Box 1275 City ATHOL State ID Zip 83801
- Source of Water GROUND WATER If Ground Water (well), Date Drilled mo. 10 / yr. 2018  
 Drilling Permit/Tag No. 0079146 Drilling Company's Name HORSLEY DRILLING INC.
- Extent of use(s) completed as authorized by the water right permit:  
 Domestic (No. households) 1 Irrigation (No. acres) 1/2 Stockwater (No. and stock type) \_\_\_\_\_  
 Other \_\_\_\_\_
- Total diversion rate or volume (storage only) for which proof is submitted 0.04 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.*
- Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)  
GROUND WATER SOURCED BY PUMP.

- 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

- Fee Enclosed \$ \_\_\_\_\_ 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.

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

Name: BYRON HIGA Telephone No. 208 304 5024 Email HARRYDOG481@gmail.com  
 Mailing Address P.O. BOX 1275 City ATHOL State ID Zip 83801

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.

By Higa BYRON HIGA PERMIT HOLDER 01-04-22  
 SIGNATURE OF PERMIT HOLDER\* PRINTED NAME AND TITLE DATE

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