

RECEIVED

OCT 22 2021

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 \$ 100  
Receipt No. C111188  
Received By Ku  
Date Received 10-22-21

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.

- Permit No. 74-16057 Telephone No. 208-303-0332
- Name of Permit Holder(s) Lamar Cockrell & Sons LLC
- Mailing Address 237 Lemhi Rd City Salmon  
State ID Zip 83467 Email c.cockrell@hotmail.com
- Source of Water waste water If **GROUND WATER** (well), Date Drilled mo. \_\_\_\_ / yr. \_\_\_\_  
Well Driller \_\_\_\_\_ Drilling Permit Number \_\_\_\_\_
- Extent of use(s) completed as authorized by the water right permit:  
Domestic (No. of households) \_\_\_\_\_ Stockwater (No. and type of stock) \_\_\_\_\_  
Irrigation (No. of acres) 406.8 Other \_\_\_\_\_
- Total rate of diversion or storage volume for which proof is submitted 1 cfs OR \_\_\_\_\_ acre-feet.

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

\_\_\_\_\_ Completed? Yes ☐ No ☐

- Fee Enclosed \$ 100 or not applicable ☐. See fee schedule on page 2 of the instructions.  
Proof statements filed without an appropriate fee, will be considered incomplete.
- Person to contact to accompany the Department representative during field examination of the water system.

Name Orin Cockrell Telephone Number 208-303-0332  
Mailing Address 182 Lemhi Rd City Salmon  
State ID Zip 83467 Email o.cockrell@hotmail.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 Orin Cockrell member Date 10-17-2021  
(Include your title, if on behalf of company or organization)

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098



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

November 4, 2021

LAMAR COCKRELL & SONS LLC  
237 LEMHI RD  
SALMON ID 83467-5141

**PROOF ACKNOWLEDGEMENT LETTER**

**RE: Permit No. 74-16057**

Dear Permit Holder:

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit.

A condition of this permit may not have been complied with according to the information you have provided on your proof form.

Condition no. 6 of this permit states:

"Prior to diversion of water under this right, the right holder shall install a lockable device, subject to the approval of the Department, in a manner that will provide the watermaster suitable control of the diversion."

You must comply with conditions of the permit without delay and prior to the field examination. I have enclosed a copy of this permit for your information. If you feel the condition is unnecessary you may submit a written request to the Department asking the requirement be waived. If your permit is subject to a water district you must also provide a written agreement from the watermaster that the requirement may be waived. The Department will consider your request and the watermaster's comments and may issue an order waiving the requirements at this time.

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 Eastern Region Office of the Department located in Idaho Falls at (208) 525-7161.

Sincerely,

Debbi Judd

Technical Records Specialist

Enclosures