

RECEIVED
JUN 28 2021
DEPARTMENT OF
WATER RESOURCES
JUN 22 2021

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

FOR OFFICE USE ONLY
Amt. of Fee \$ 100.00
Receipt No. E047106
Received By m. pettis
Date Received 6-22-21

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 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. 35-13918 Telephone No. 208-680-0755
2. Name of Permit Holder(s) Groveland Water & Sewer District
3. Mailing Address PO BOX 833 City BLACKFOOT
State IDAHO Zip 83221 Email _____
4. Source of Water Ground Water If **GROUND WATER** (well), Date Drilled mo. 10 / yr. 2017
Well Driller High Plains Drilling Permit Number _____
5. 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) _____ Other Municipal for 81 homes (in-house use)

6. Total rate of diversion or storage volume for which proof is submitted 0.48 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	Is a measuring device required?	Yes ☒	No ☐
	If yes, has the measuring device been installed?	Yes ☒	No ☐
Lockable Controlling Device	Is a lockable device required to control the diversion?	Yes ☒	No ☐
	If yes, has the lockable device been installed?	Yes ☒	No ☐
Fish Screen	Is a fish screen required?	Yes ☐	No ☒
	If yes, has the fish screen been installed?	Yes ☐	No ☒

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.

Documentation showing system is regulated by DEQ as a PWS. Completed? Yes ☒ No ☐

8. Fee Enclosed \$ 100.00 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 Paul Chambers Telephone Number 208-680-0755
Mailing Address PO BOX 833 City BLACKFOOT
State IDAHO Zip 83221 Email _____

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 [Signature] Board member date 6-22-21
(Include your title, if on behalf of company or organization)

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

Drinking Water Branch

Links

[Water System Facilities](#)
[Sample Schedules](#)
[Coliform/Microbial
Sample Results](#)
[Coliform Sample
Summary Results](#)
[Lead And Copper
Sample Summary
Results](#)
[Chem/Rad
Samples/Results](#)
[Chem/Rad
Samples/Results by
Analyte](#)
[Violations/Enforcement
Actions](#)
[Site Visits](#)
[Milestones](#)
[Return Links](#)
[Water Systems](#)
[Water System Search](#)
[County Map](#)
[Glossary](#)

Water System Details

Water System No. :	ID6060095	Federal Type :	C
Water System Name :	GROVELAND WATER AND SEWER DIST	State Type :	C
Principal County Served :	BINGHAM	Primary Source :	GW
Status :	A	Activity Date :	01-31-1987

Points of Contact

Name	Job Title	Type	Phone	Address	Email
YANCEY, CLEM		OP			
CHAMBERS, STERLING	DWD1-19210-R	SA			
CHAMBERS, STERLING	DWD1-19210-R	DO			
GRAY, KAREN		EC			
GRAY, KAREN		SA			
PANGE, MARC		AC			
PANGE, MARC		AC			

Annual Operating Periods & Population Served

Service Connections

Start Month	Start Day	End Month	End Day	Population Type	Population Served	Type	Count	Meter Type	Meter Size Measure
1	1	12	31	R	225	CB	57	UM	0

Sources of Water

Service Areas

Name	Type Code	Status
WELL #1	WL	A
WELL #2	WL	A

Code	Name
R	RESIDENTIAL AREA

Water Purchases

Seller Water System No.	Water System Name	Seller Facility Type	Seller State Asgn ID No.	Buyer Facility Type	Buyer State Asgn ID No.
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State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

GARY SPACKMAN
Director

July 1, 2021

GROVELAND WATER & SEWER DISTRICT
PO BOX 833
BLACKFOOT ID 83221

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 35-13918

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.

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

c: ROCKY MOUNTAIN ENVIRONMENTAL ASSOC – *via email*