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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

STATEMENT OF COMPLETION

IDWR/NORTH

DEPARTMENT OF
WATER RESOURCES

FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$ 50

Receipt No. NO. 310295

Received By NS

Date Received 7/28/20

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. 92-11023 Telephone No. 208.334.0200

2. Name of Permit Holder(s) State of Idaho Dept of Lands

3. Mailing Address POB 83720 City Boise

State ID Zip 83720 Email mandersen@idl.idaho.gov

4. Source of Water Syringa Creek If **GROUND WATER** (well), Date Drilled mo. / yr.

Well Driller _____ 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 Industrial and Fire Protection
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6. Total rate of diversion or storage volume for which proof is submitted 0.2 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 ☒
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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.

Max annual vol=800 gal(Type 4 engine).Intake fish screen.Photos on request Completed? Yes ☒ No ☐

8. Fee Enclosed \$ 50.00 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 Rick Arcano Telephone Number 208.245.4551

Mailing Address 1806 Main Ave City St. Maries

State ID Zip 83861 Email rarcano@idl.idaho.gov

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 Under Admin Operations DA Date 7/27/20
(Include your title, if on behalf of company or organization)

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