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NOV 0 2 2020 STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

DEPARTIST ATEMENT OF COMPLETION WATER REPORTSUBMITTING PROOF OF BENEFICIAL USE

IDWR / NORTH

FOR OFFICE USE ONLY Amt. of Fee \$_5000 Receipt No. No. Receipted By Date Receipted 10-

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

Name of Permit Holder(s)	Telephone No. (509) 325 arry H. Gibson 1341 City Spok We If GROUND WATER (well), Date Drilled in Drilling Permit Number	ane no. N	
Name of Permit Holder(s)	City Spok 1341 City Spok 10 Email Ke If GROUND WATER (well), Date Drilled in Drilling Permit Number	ane no. N	
State <u>WA</u> Zip <u>992</u> Source of Water <u>CDA La</u> Well Driller <u>~ ~ /a</u> Extent of use(s) completed as a	If GROUND WATER (well), Date Drilled in Drilling Permit Number	no. ν	
State <u>WA</u> Zip <u>992</u> Source of Water <u>CDA La</u> Well Driller <u>~ ~ /a</u> Extent of use(s) completed as a	If GROUND WATER (well), Date Drilled in Drilling Permit Number	no. ν	
Source of Water <u>CDA La</u> Well Driller <u>— M/a</u> Extent of use(s) completed as a	If GROUND WATER (well), Date Drilled in Drilling Permit Number	no	/1 Ga.
Well Driller	Drilling Permit Number		
Extent of use(s) completed as as	15	α	~
Demostic (No. of households)	uthorized by the water right permit:		
Domestic (No. of nouseholds)	1 Stockwater (No. and type of stock)/a		
	Other		
	volume for which proof is submittedO. O. H_ cfs OR	a acre-	feet.
Compliance with a measuring de Refer to the approval conditions	vice requirement, lockable controlling device requirement, and/or on your permit and respond accordingly.		
Measuring Device	Is a measuring device required?	Yes 🗌	No 🗵
			No 🗀
Lockable Controlling Device	If yes, has the lockable device been installed?	Yes □ Yes □	No ☑ No □
Fish Screen	Is a fish screen required?	Yes □	No 🔀
	If yes, has the fish screen been installed?	Yes 🗌	No 🗌
Do the approval conditions on ye	iditions below and attach documents with the required informat	ion.	
	/		No 🗌
	A STATE OF THE STA	S.	
		-	em.
Name Garry H. Gib	<u>509-325-</u>	0907	
		ne	
State	D Email		
reloped and water has been div permit is relinquished to the S nature of Permit Holder	rerted and applied to a beneficial use. I understand that any state of Idaho. Date	undevelo	rmit has been bed portion of
	Compliance with a measuring der Refer to the approval conditions The Department will not issue Measuring Device Lockable Controlling Device Lockable Controlling Device Fish Screen Other Conditions of Permit Do the approval conditions on your peneficial use? If yes, list the converse Enclosed \$ 50 or not Proof statements filed without an Person to contact to accompany Name Garry H. Gib Mailing Address Po Box State WA Zip G9216 Information given on this formeloped and water has been div permit is relinquished to the September 1997.	Compliance with a measuring device requirement, lockable controlling device requirement, and/or 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? If yes, has the measuring device been installed? Lockable Controlling Device Is a lockable device required to control the diversion? If yes, has the lockable device been installed? Is a fish screen required? If yes, has the fish screen been installed? Other Conditions of Permit Do the approval conditions on your permit require you to submit additional information in concenerational use? If yes, list the conditions below and attach documents with the required information of the enditional use? Fee Enclosed \$ 50 or not applicable \(\sigma \) See fee schedule on page 2 of the instruction Proof statements filled without an appropriate fee, will be considered incomplete. Person to contact to accompany the Department representative during field examination of the Name \(\sigma \) And \(\sigma \) So \(\sigma \) And \(\sigma \) Telephone Number \(\sigma \) So \(\sigma \) State \(\sigma \) And \(\sigma \) See fee schedule on page 2 of the instruction Proof statements filled without an appropriate fee, will be considered incomplete. Person to contact to accompany the Department representative during field examination of the Name \(\sigma \) And \(\sigma \) So \(\sigma \) So \(\sigma \) And \(\sigma \) So \(\sigma \) So \(\sigma \) And \(\sigma \) So \(\si	Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions considered 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