

RECEIVED

NOV 02 2020

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 \$	50.00
Receipt No.	C109440
Received By	IKM
Date Received	11.2.2020

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. 75-14989 Telephone No. 208-940-0154

2. Name of Permit Holder(s) Ward Wm Witte

3. Mailing Address PO Box 282 City Salmon
State ID Zip 83467 Email _____

4. Source of Water Springs 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) 1 Stockwater (No. and type of stock) 15 horses
Irrigation (No. of acres) _____ Other _____

6. Total rate of diversion or storage volume for which proof is submitted 0.06 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 <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	If yes, has the measuring device been installed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Lockable Controlling Device	Is a lockable device required to control the diversion?	Yes <input type="checkbox"/>	No <input checked="" 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 ☐

8. Fee Enclosed \$ 50 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 Ward Witte Telephone Number 208-940-0154

Mailing Address as above City _____

State _____ Zip _____ 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  Date 10-26-20
(Include your title, if on behalf of company or organization)

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



under ground
1000 gal Cistern

50'



over Flow from
Cistern



Return Line from
Cabin to Pond
for Live stock use



Frost free Hydrant
out side Cabin over
flow to pond.



over Flow from Cabin
35' of Drop. 1000 gal
Cistern in ground 6-7
gal of water per minute
goes under cabin + outside
Faucet then a return to Pond
for Live stock use.

Thanks
Ward



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

BRAD LITTLE
Governor

GARY SPACKMAN
Director

November 12, 2020

WARD WM WITTE
PO BOX 282
SALMON ID 83467-0282

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 75-14989

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