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DEPARTMENT OF WATER RESOURCES

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

STATEMENT OF COMPLETION

FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY	
Amt. of Fee \$_50	
Receipt No	
Receipted By	
Date Receipted 11.6.20	0

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** <u>and</u> that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary,** <u>or</u> **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 <u>idwr.idaho.gov</u> 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 <u>not</u> applying for an extension, please notify the Department in writing.

1.	Permit No. <u>95-1787</u>	1 Telephone No915 820 4	2009			
2.	Name of Permit Holder(s)	ICHARD CANE				
3.	Mailing Address 4321 R	OCKY FORD DRIVE CITY PROSPE	PR			
	State 1 Zip 7501	& Email KALAN 654 & YAHOO.C.	OM			
4.	Source of Water LAKE C	If GROUND WATER (well), Date Drilled mo	0			
	Well Driller	Drilling Permit Number	4			
5.		thorized by the water right permit:				
	Domestic (No. of households)	Stockwater (No. and type of stock)				
		Other				
6.	Total rate of diversion or storage	volume for which proof is submitted 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? If yes, has the measuring device been installed?	Yes □ Yes □	No ☑ //A No ☑		
	Lockable Controlling Device	Is a lockable device required to control the diversion? If yes, has the lockable device been installed?	Yes □ Yes □	No ☒ N Ƙ No ፟፟፟፟፟		
	Fish Screen	Is a fish screen required? If yes, has the fish screen been installed?	Yes ☒ Yes ☒	No □ ista		
	Other Conditions of Permit					
	Do the approval conditions on your permit require you to submit additional information in connection with your proof o beneficial use? If yes, list the conditions below and attach documents with the required information.					
		Completed?		No 🔉		
8.	Fee Enclosed \$ 50.00 or no Proof statements filed without an	ot applicable □. See fee schedule on page 2 of the instructions appropriate fee, will be considered incomplete.				
9.	Person to contact to accompany	the Department representative during field examination of the w	ater syste	m _s .		
	Name	Telephone Number				
	Mailing Address	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 11-3-20						

(Include your title, if on behalf of company or organization)