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OCT 2 3 2020

DEPARTMENT OF WATER PRESCUROR

IDWR/NORTH

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

STATEMENT OF COMPLETION

FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE Amt. of Fee \$_5	SE ONLY
Receipt No. No.	036504
Receipted By	0
Date Receipted	10-21-2020

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of awater 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. 95-17467 Telephone No. 208-412-4161		
2.	Name of Permit Holder(s) Crystal Water Association Incorporation		
	Mailing Address 6197 W. Mallory Rd. City Rathdom		
	State TO Zip 89858 Email Skinkade 1919 @ gmail. com		
4.	Source of Water QCCCCC If GROUND WATER (well), Date Drilled mo. OH / yr. SC		
	Well Driller Ossoc Well Ocilles Too Drilling Permit Number NO33193		
5.	Extent of use(s) completed as authorized by the water right permit:		
	Domestic (No. of households) 2 Stockwater (No. and type of stock) 50		
	Irrigation (No. of acres) Other		
6.	Total rate of diversion or storage volume for which proof is submitted 6.05 cfs OR 3.0 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(No(
	Lockable Controlling Device Is a lockable device required to control the diversion? Yes Note Note If yes, has the lockable device been installed? Yes Note Note Installed?		
	Fish Screen Is a fish screen required?		
	If yes, has the fish screen been installed? Yes □ No ②		
	Other Conditions of Permit Do the approval conditions on your permit require you to submit additional information in according with your permit.		
	Do the approval conditions on your permit require you to submit additional information in connection with your proof obeneficial use? If yes, list the conditions below and attach documents with the required information.		
	Completed? Yes ☐ No ☐		
	Fee Enclosed \$ 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 500 Kinkade Telephone Number 208-412-4161		
	Mailing Address 6197 (D. Mallow Rd City Rathdrem		
	State ID Zip 83858 Email Skinkado 1919 & gmail. com		

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.



State of Idaho DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Bolse, Idaho 83720-0098
Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.ldwr.idaho.gov

GARY SPACKMAN Director

November 3, 2020

CRYSTAL WATER CORP 6197 W MALLORY RD RATHDRUM ID 83858

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 95-17457

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.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Debbi Judd

Technical Records Specialist

Enclosures