

RECEIVED

SEP 01 2020

DEPT. OF WATER RESOURCES
SOUTHERN REGIONSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY	
Amt. of Fee \$	100.00
Receipt No.	3038117
Received By	bm
Date Received	9-1-2020

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.

- Permit No. 47-17636 Telephone No. 208-733-6900
- Name of Permit Holder(s) Twin Falls School District #411
- Mailing Address 201 Main Ave W City Twin Falls
State ID Zip 83301 Email bowmanry@tfsd.org
- Source of Water Ground Water If **GROUND WATER** (well), Date Drilled mo. August / yr. 2015
Well Driller Walker Water Systems Inc. Drilling Permit Number 875433
- 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 Heating and Cooling
- Total rate of diversion or storage volume for which proof is submitted .27 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?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	If yes, has the measuring device been installed?	Yes <input checked="" 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.

Monthly Measurement - GPM Average Completed? Yes ☒ No ☐

- Fee Enclosed \$ 100 or not applicable ☐. See fee schedule on page 2 of the instructions.
Proof statements filed without an appropriate fee, will be considered incomplete.
- Person to contact to accompany the Department representative during field examination of the water system.
Name Ryan Bowman Telephone Number 208-733-6900
Mailing Address 201 Main Ave W City Twin Falls
State ID Zip 83301 Email bowmanry@tfsd.org

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 Ryan Bowman - Director of Operations Date 8/26/2020
(Include your title, if on behalf of company or organization)

Rock Creek Elementary School

Year	January	February	March	April	May	June	July	August	September	October	November	
2015										0	0	0
2016	0	0	0	0	19.2	19.2	0	19.2	19.2	19.2	0	0
2017	0	0	0	0	19.2	19.2	0	19.2	19.2	19.2	0	0
2018	0	0	0	0	19.2	19.2	0	19.2	19.2	19.2	0	0
2019	0	0	0	0	19.2	19.2	0	19.2	19.2	19.2	0	0
2020	0	0	0	0	19.2	19.2	0	19.2				0

$4,515,900 \text{ Gallons} / 98 \text{ days per year (avg.)} = 46,080.61 \text{ gallons per day per year (reflecting a yearly average over 4 yrs. of operation)}$

$46,080.61 \text{ gallons per year} / 4 \text{ years} = 11520.16 \text{ gallons per day}$

$11520.16 \text{ gallons per day} / 10 \text{ hours of operation per day} = 1152.02 \text{ gallons per hour}$

$1152.02 \text{ gallons per hour} / 60 \text{ minutes per hour} = 19.2 \text{ gallons per minute (average)}$

The reading was not done on a consistent basis thus we took the average usage over the time span of the operation.

The system was designed to accommodate 120gpm flows.

RECEIVED

SEP 01 2020

DEPT OF WATER RESOURCES
SOUTHERN REGION



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

GARY SPACKMAN
Director

September 21, 2020

TWIN FALLS SCHOOL DISTRICT #411
201 MAIN AVE W
TWIN FALLS ID 83301-6103

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit Nos. 47-17635 and 47-17636

Dear Permit Holder:

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permits. 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 Southern Region Office of the Department located in Twin Falls at (208) 736-3033.

Sincerely,

Debbi Judd
Technical Records Specialist

Enclosures

c: EHM ENGINEERS INC – *via email*