MAY	EIVED 104 2020	STATE OF IDAHO DEPARTMENT OF WATER RESOUI STATEMENT OF COMPLE				
Th ha ac yo	is been completed and that wa companied by an examination f ater right examiner. Please refer by Department office or visit the De	FOR SUBMITTING PROOF OF BENEFIC ources considers this form a statement by the ter has been applied to beneficial use to t ee, when necessary, or by a completed Ben to the instructions and fee schedule for this fo partment's website at idwr.idaho.gov for an stablished the authorized use of the water and	e permit holder(s) the he extent describe neficial Use Field rm. If ownership of <i>Assignment of Per</i> i	ed below. This Report prepare the permit has o <i>mit</i> form. If you y	t of a water right form must be ad by a certified changed, contact vish to relinquish	
1.	Permit No. 85-15769	Telephone No	(208) 924-5358	3		
2.	Name of Permit Holder(s) <u>City</u>					
	Mailing Address PO Box 245		City Winches	ter		
	State ID Zip 83555	Email winchcty@connectwire				
4.	Source of Water Groundwater		(well), Date Drille	d mo. 1	/ yr. 2015	
	Well Driller Stuvenga Vessey		it Number 87388		_ , , ,	
5.	Extent of use(s) completed as authorized by the water right permit:					
	Domestic (No. of households) 210 Stockwater (No. and type of stock)					
		Other				
6		e volume for which proof is submitted				
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 🗌	
	Leekekle Centrelling Device	If yes, has the measuring device been i		Yes 🗹	No 🗋	
	Lockable Controlling Device	Is a lockable device required to control If yes, has the lockable device been ins		? Yes □ Yes □	No 🖸 No 🗖	
	Fish Screen	Is a fish screen required?		Yes 🗌	No 🔽	
		If yes, has the fish screen been installed	d?	Yes 🗋		
	Other Conditions of Permit Do the approval conditions on beneficial use? If yes, list the co	your permit require you to submit additior anditions below and attach documents with	the required info	connection wit rmation. eted? Yes ⊡	h your proof of No □	
8.		not applicable []. See fee schedule on pa in appropriate fee, will be considered incor	ge 2 of the instruc			
		y the Department representative during fie		the water syste	em.	
9.	Person to contact to accompar			,		
9.	Name Michael D Haight	Telephone Numb	er (208) 924-535	58		
9.		Telephone Numb	er (208) 924-535 City Winches			

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

(Include your little, if on be rall of company or organization)

2020

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

Form No. 217 12/15

RECEIVED

MAY 0 4 2020

DEPARTMENT OF

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES STATEMENT OF COMPLETION FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE	USE ONLY	
Amt. of Fee \$	200.00	
Receipt No.	C108695	
Receipted By	Ku	
Date Receipted	5-4-202	0

WATER RESOURCES 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. <u>85-15769</u>		Telephone No.	(208) 924-5358		
2.	Name of Permit Holder(s) City o	f Winchester				
3.	Mailing Address PO Box 245			City Winchester		
	State ID Zip 83555	Email	winchcty@connectwirel	ess.us		
4 .	Source of Water Groundwater		If GROUND WATER (well), Date Drilled	mo. <u>12</u>	_ / yr2014
	Well Driller Stuvenga Vessey D	rilling	Drilling Permit	Number 873886		
5.	Extent of use(s) completed as au	Ithorized by the	water right permit:			
	Domestic (No. of households)	210 Stockwate	er (No. and type of stock)		
	Irrigation (No. of acres)	Other				
6.	Total rate of diversion or storage	volume for which	proof is submitted	17 cfs OR	acre-	feet.
7.	 Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of pern Refer to the approval conditions on your permit and respond accordingly. The Department will not issue a license if permit conditions are not met. 				itions of permit:	
	Measuring Device	-	device required? easuring device been in	stalled?	Yes ☑ Yes ☑	No 🗆 No 🗔
	Lockable Controlling Device		vice required to contro ckable device been insta		Yes □ Yes □	No ☑ No □
	Fish Screen	ls a fish screen			Yes 🗌	No 🔽
		If yes, has the fis	sh screen been installed	?	Yes 🗌	No 🗌
	Other Conditions of Permit Do the approval conditions on your permit require you to submit additional information in connection with your proof					h vour proof of
beneficial use? If yes, list the conditions below and attach documents with the required information.						
				· · ·		No 🗌
8.	Fee Enclosed \$ <u>100</u> 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	o contact to accompany the Department representative during field examination of the water system.				
Name Michael D Haight Telephone Number (208) 924-5358						
	Mailing Address PO Box 245			City Winchester		
	State ID Zip 83555	Email _	winchcty@connectwirele	ess.us		

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	Include your title, if on behalf of pompany or o	<u>Mary 04</u> Date	5/1/2020
		3-1	

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

 From:
 City of Winchester

 To:
 Judd, Debbl

 Subject:
 Permit 85-15769

 Date:
 Thursday, May 21, 2020 12:17:36 PM

 Attachments:
 Scan0786.pdf

Good Morning.

I believe that this letter from DEQ will satisfy the documentation that you need. If this does not, please let us know what further information you require.

Thanks. Have a great weekend!

LeAnn J. Trautman City Clerk City ofWinchester (208) 924-5358 (208) 924-5711 (fax)

RECEIVED MAY 2 1 2020 DEPARTMENT OF WATER RESOURCES



STATE OF IDAHO DEPARTMENT OF ENVIRONMENTAL QUALITY

1118 F Street Lewiston, Idaho 83501 (208) 799-4370 www.deq.idaho.gov Brad Little, Governor John H. Tippets, Director

May 20, 2020

Mike Haight Winchester Water Department P.O. Box 245 Winchester, ID 83555

Subject: Regulatory Status of Water System – Winchester Water Department – PWS: ID2310007

Dear Mr. Haight:

This letter is to acknowledge that the City of Winchester Water System is a community public water system (PWS) per Idaho Rules for Public Drinking Water Systems (IDAPA 58.01.08). As a community PWS, the system is regulated by Idaho Department of Environmental Quality (DEQ). The system is located in Winchester, ID in Lewis County and provides drinking water to 400 people through 212 service connections. The system provides drinking water through the use of six ground water wells.

- Well #4 Facility ID# E0005242
- Well #6 Facility ID# E0008546
- Well #7 Facility ID# E0005243
- Well #10 Facility ID# E0005241
- Well #13 Facility ID# D0067919
- Well #15 Facility ID# D0067920

If you have any questions or comments, please contact me at (208) 799-4370 or hannah.erickson@deq.idaho.gov.

Regards,

Hamah Enchen

Hannah Erickson Water Quality Engineer

c: Michael Camin, DEQ 2009ABM4952

Good afternoon,

The Department received a proof of beneficial use for City of Winchester 85-15769 on May 4, 2020. A condition of this permit is "9. Prior to or in connection with the proof of beneficial use statement to be submitted for municipal water use under this right, the right holder shall provide the department with documentation showing that the water supply system is being regulated by the Idaho Department of Environmental Quality as a public water supply and that it has been issued a public water supply number." This was not included with the proof that submitted. Please provide this as soon as possible and within 14 days to insure that the permit does not lapse.

Please feel free to contact me should you have questions or concerns.

Debbi Judd Technical Records Specialist <u>debbi.judd@idwr.idaho.gov</u>

Idaho Department of Water Resources 322 E Front St PO Box 83720 Boise, ID 83720-0098 208-287-4920 www.idwr.idaho.gov



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

Governor May 29, 2020 GARY SPACKMAN Director

CITY OF WINCHESTER PO BOX 245 WINCHESTER ID 83555-0245

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 85-15769

Dear Permit Holder:

The Department acknowledges receipt of the Proof of Beneficial Use form ("proof") and license examination fee for the above-referenced water right permit. Enclosed is an order that reinstates this permit since proof and the license examination fee were submitted after the proof deadline. Please note that the priority date for this permit has been advanced to **April 15, 2015**, as provided in Idaho Code § 42-218a(2).

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 according to the conditions of the permit. Please note that a condition of this permit is:

"9. Prior to or in connection with the proof of beneficial use statement to be submitted for municipal water use under this right, the right holder shall provide the department with documentation showing that the water supply system is being regulated by the Idaho Department of Environmental Quality as a public water supply and that it has been issued a public water supply number."

This information should be submitted as soon as possible and before the field examination.

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 <u>www.idwr.idaho.gov</u>.

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.

Debbi Judd Technical Records Specialist

Enclosures