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APR 0 6 2020

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 \$	
Receipt No.	
Receipted By	KM
Date Receipted	4-6-2020

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.

Ď	epartment in writing.		
1.	Permit No. 97-07558 Telephone No. 719 464 4281		
2.	Name of Permit Holder(s) Robinson Family Living Trust Termer D Robinson, Timiter		
3.	Mailing Address 10821 Greenbelt Drive City PeyTon		
	State CO Zip 80931 Email Terry 91950 MIN. Com		
4.	Source of Water Ground water If GROUND WATER (well), Date Drilled mo. 01 /vr. 2019		
	Well Driller Pioneer Well Drilling Permit Number 888 627		
5.	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		
6.	Total rate of diversion or storage volume for which proof is submittedO 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 ☐ No 🖸		
	If yes, has the measuring device been installed? Yes □ No □		
	Lockable Controlling Device Is a lockable device required to control the diversion? Yes No If yes, has the lockable device been installed? Yes No		
	Fish Screen Is a fish screen required? Yes □ No 🗵		
	If yes, has the fish 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 of beneficial use? If yes, list the conditions below and attach documents with the required information.		
	Completed? Yes No		
8.	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 Terence Robinson Telephone Number 719 464 4281		
ı	Mailing Address 10821 Granbelt Dr. City PeyTon		
	State CO Zip 80831 Email Tem 9195 emin. com		
de th	te information given on this form is my true statement of the extent to which the above numbered permit has been eveloped and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of e permit is relinquished to the State of Idaho.		
Sig	gnature of Permit Holder 7 DRA TWITE Date 3-31-2020		

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