

RECEIVED

JAN 30 2020

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

FOR OFFICE USE ONLY

Amt. of Fee \$ 250.00
Receipt No. 6108270
Received By KM
Date Received 1-30-2020

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. 37-22876 Telephone No. 412-812-0697
- Name of Permit Holder(s) Flying Heart Ranch II Subdivision Owners Association
- Mailing Address PO Box 2163 City Hailey
State ID Zip 83333 Email mistick@prodigy.net
- Source of Water Groundwater If **GROUND WATER** (well), Date Drilled mo. 10 / yr. 2015
Well Driller Lucas Ward Drilling, Inc Drilling Permit Number 876707 and 877105

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 aesthetic, wildlife, recreation

- Total rate of diversion or storage volume for which proof is submitted 7.0 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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	If yes, has the lockable device been installed?	Yes <input checked="" 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 checked="" 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.

Completed? Yes ☐ No ☒

- Fee Enclosed \$ \$250.00 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 Will Miller and Tom Mistick Telephone Number 208-721-0585 and 412-812-0697
Mailing Address PO Box 1030 City Sun Valley
State ID Zip 83353 Email willmillerconsulting@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.

Signature of Permit Holder [Signature] Date 1/26/20
(Include your title, if on behalf of company or organization)

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



BRAD LITTLE
Governor

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

February 4, 2020

FLYING HEART RANCH II SUBDIVISION OWNERS ASSN
PO BOX 2163
HAILEY ID 83333

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 37-22876

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.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: GARY D SLETTE – *via email*
BROCKWAY ENGINEERING PLLC – *via email*