

RECEIVED

JUL 28 2017 JUL 11 2017

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 \$	50
Receipt No.	C103895
Received By	VC
Date Received	7/29/17

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. 45-14421 Telephone No. 208 673 6474
- Name of Permit Holder(s) CHAD MANDERSCHIED
- Mailing Address PO BOX 27 City ALBION
State 10 Zip 83311 Email mandenchad@atcnet.net
- Source of Water WELL If **GROUND WATER** (well), Date Drilled mo. ____ / yr. ____
Well Driller COUCH Drilling Permit Number _____
- 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 NOT CONSUMPTIVE FOR HEATING
- Total rate of diversion or storage volume for which proof is submitted 2.10 cfs 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 ☐	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 ☒

- 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.
- Person to contact to accompany the Department representative during field examination of the water system.
Name CHAD MANDERSCHIED Telephone Number 208 673 6474
Mailing Address PO BOX 27 City ALBION
State 10 Zip 83311 Email mandenchad@atcnet.net

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 Chad Manderschied Date JULY 8 2017
(Include your title, if on behalf of company or organization)



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

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

August 16, 2017

CHAD MANDERSCHIED
PO BOX 27
ALBION ID 83311

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 45-14421

Dear Permit Holder(s):

The department acknowledges receipt of the Proof of Beneficial Use ("proof") form and license examination fee submitted for the above referenced permit.

One condition of this permit may not have been complied with according to the information you have provided on your proof form.

Condition no. 5 of this permit states:

"A lockable device subject to the approval of the Department shall be maintained on the diverting works in a manner that will provide the watermaster suitable control of the diversion."

You must comply with this condition of the permit without delay and prior to the field examination. I have enclosed a copy of this permit for your information. If you feel the condition is unnecessary you may submit a written request to the department asking the requirement be waived. If your permit is subject to a water district you must also provide a written agreement from the watermaster that the requirement may be waived. The department will consider your request and the watermaster's comments, and may issue an order waiving the requirement at this time.

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 Section 42-248, Idaho Code, 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,

A handwritten signature in blue ink that reads "Darla Block". The signature is fluid and cursive, with the first name "Darla" and the last name "Block" clearly distinguishable.

Darla Block
Technical Records Specialist

Enclosure(s)