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OCT 26 1990

Department of Water Resources
Eastern District Office

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

For Office Use Only

Amt. of Fee \$ 50.00Date 10-26-90Receipt No. 4 E015376Received by HWSRECEIVED
OCT 29 1990

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

Permit No. 74-07249 Telephone No. 756-2065Name(s) of Permit Holder(s): Boyd E. ArchmanPost Office Address: RT 1 Box 48-C Salmon IdahoSource of Water: Spring

If ground water, well driller's name: _____ Date drilled: _____

Extent of Use:

Domestic _____ (No. of households)

Irrigation 10 (No. of acres)Stockwater 150 (No. and type of stock)

Other _____

approx. 150 head of cows and five horsesTotal rate and/or volume for which proof is submitted 0.20 cfs _____ acre/feetShow date water was first diverted and beneficially used under this permit: approx Oct 20, 1990

One of the following may be a condition of approval of your permit:

Measuring device: Required? ___Yes XNo Installed? ___Yes ___No

OR

Flow Measurement Port: Required? ___Yes XNo Installed? ___Yes ___NoFee Enclosed: \$ 50.00 (See License Examination Fee Schedule)

Person to contact to accompany the Department representative during the field examination:

Name Boyd E. Archman Telephone No. 756-2065Address RT 1 Box 48-C Salmon Idaho

The above information is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

MICROFILMED

JAN 17 1991

Date Oct 25Signature (and title if on behalf of a company or organization) Boyd E. Archman