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MAY 19 2016

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 \$	50.00
Receipt No.	C102039
Received By	AO
Date Received	5-19-16

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. 92-10101 Telephone No. (208) 413-0244
 2. Name of Permit Holder(s) Gail Hagen C/o Heidi Hagen
 3. Mailing Address 1133 Airway Ave City Lewiston
 State ID Zip 83501 Email _____
 4. Source of Water Crystal Creek If **GROUND WATER** (well), Date Drilled mo. ____ / yr. ____
 Well Driller _____ Drilling Permit Number _____

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 Recreation

6. Total rate of diversion or storage volume for which proof is submitted 0.20 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 \$ 50.00 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 Heidi Hagen Telephone Number 208-413-0244
 Mailing Address 1133 Airway Ave City Lewiston
 State ID Zip 83501 Email _____

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

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

Date

5/16/16

David A. Gittins, ISB #6514
Law Offices of David A. Gittins
843 Seventh Street
P.O. Box 191
Clarkston, WA 99403
(509) 758-2501
(509) 758-3576 (fax)

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DEPARTMENT OF
WATER RESOURCES

FILED

2015 OCT 28 PM 1 12

PATTY O. WEEKS
CLERK OF THE DIST. COURT

DONNA EVANS
DEPUTY

Attorney for Personal Representative

IN THE DISTRICT COURT OF THE SECOND JUDICIAL DISTRICT OF
THE STATE OF IDAHO, IN AND FOR THE COUNTY OF NEZ PERCE

In the Matter of the Estate of:

GAIL D. HAGEN,

Deceased.

)
)
)
)
)

No. CV15-01980

LETTERS TESTAMENTARY

Heidi A. Hagen is hereby appointed Personal Representative of the Estate of Gail D.
Hagen, deceased, with all authority pertaining thereto. Administration of the estate is
unsupervised.

These Letters are issued to evidence the appointment, qualification, and authority of the
Personal Representative.

WITNESS: GREG KALBFLEISCH Magistrate of the District Court, County of
Nez Perce, State of Idaho, with the seal of the Court affixed this 28 day of October, 2015.

GREG KALBFLEISCH

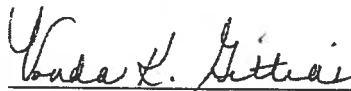
MAGISTRATE

LETTERS TESTAMENTARY

County of Asotin

Heidi A. Hagen

SIGNED AND SWORN to before me this 26th day of October, 2015.



My appointment expires: 9-17-2017



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

May 24, 2016

GAIL D HAGEN
1633 AIRWAY AVE
LEWISTON ID 83501

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 92-10101

Dear Permit Holder(s):

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 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 Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Darla Block
Technical Records Specialist

Enclosure(s)