



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 16, 2016

ALVIN DAVISON
TINA DAVISON
PO BOX 35
MURPHY ID 83650

PROOF DEFICIENCY LETTER

RE: Permit No. 57-11862

Dear Permit Holder(s):

The Department received the proof of beneficial use (proof) form you submitted for the above referenced permit. I am returning the form to you because information provided on the proof form is not sufficient or incomplete. Please address the following items on the form:

- Item no. 6 through item no. 8 of the proof form are incomplete.
- Please submit the required \$50.00 License examination fee.

The license examination fee was not submitted with the beneficial use form. This permit authorizes a maximum diversion rate of 0.12 cfs (cubic feet per second) from ground water requiring a license examination fee of \$50.00. The Department does not consider your proof received until the fee has been submitted.

To provide you with information regarding the permitted water uses and diversion rate, enclosed is a copy of the permit for your reference.

Please complete the proof form to provide the Department with information about your completed development, and resubmit the completed form along with the required fee before the permit proof due date of December 1, 2016.

If you have any questions concerning this matter, please contact me at (208) 287-4945.

Sincerely,

Darla Block
Technical Records Specialist

Enclosure(s)

5.12.16

I'm sorry I don't know
what cfs we are pumping.
at this time the well is
not pumping volume of
water it pumped when well
drillers finished. We just
got irrigation hooked up
last night. Well drillers are
out today checking well.
The well drillers do not know
what cfs is so I could not
send money. Well drillers have
to come back out and drill
again, could be cave-ins.

Thank you,
Tina Davison

RECEIVED

MAY 13 2016

DEPARTMENT OF
WATER RESOURCES

RECEIVED

MAY 13 2016

DEPARTMENT OF
WATER RESOURCES

RECEIVED

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.	_____
Receipt By:	_____
Date Received:	_____

MAY 13 2016

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 extension 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, please contact any Department office or visit the Department's website at: www.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.: 57-11862 Telephone No.: 208-949-3825 or 208-949-7082
- Name of Permit Holder(s): Alvin and Tina Davison
- Mailing Address: P.O. Box 35 City: Murphy
State: Id Zip: 83650 Email: _____
- Source of Water: well If **GROUND WATER** (well), Date Drilled: mo. 4 / yr. 2016
Well Driller: Adamson Pump Drilling Permit Number: 0071784
- 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): 4X Other: _____
- Total rate of diversion or storage volume for which proof is submitted: _____ 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 ☐
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: \$_____ See fee schedule on back of the instructions for filing proof of beneficial use.
Proofs 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: Alvin or Tina Davison Telephone Number: 949-3825 or 949-7082
Mailing Address: P.O. Box 35 City: Murphy
State: Id Zip: 83650 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: Tina Davison Date: 5.12.16
(Include your title, if on behalf of company or organization)

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

