



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Boise, ID 83706 - P.O. Box 83720, Boise, ID 83720-0098
Phone: (208) 327-7900 Fax: (208) 327-7866 Web Site: www.idwr.state.id.us

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

May 1, 2003

MICHAEL E WILLARD
1339 HAMPSHIRE CR
NEWPORT BEACH CA 92660

RE: Water Right No. 37-00004K

Dear Permit Holder(s):

RESUMPTION OF WATER ACKNOWLEDGEMENT

The department acknowledges receipt of your statement of resumed beneficial use of water submitted for the above-referenced water right.

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. Please contact any office of the department for the proper form to file a change of ownership of a water right and/or a change in the address of the owner.

If you have any questions regarding this matter, please contact me directly at (208) 327-7953.

Sincerely,

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Encl.

c: IDWR - Region

37-00004K

Form 3-222
12/99

RECEIVED

FEB 18 2003

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Department of Water Resources

RESUMPTION OF BENEFICIAL USE

The Idaho Department of Water Resources will consider this form as a statement that the water right holder(s) has/have resumed the use of water for the water right identified below. This form must be returned to the department or the water right will revert to the state of Idaho.

Water Right Number(s) 37-00004C KName of Water Right Holder(s) MICHAEL E WILLARDMailing Address 1339 HAMPSHIRE CR Newport Beach, Ca 92660Telephone Number 949-574-9996Source of Water (Groundwater/Surface) Surface

Extent of Use: Domestic _____ (number of households)

Stockwater _____ (number and type of stock)

Irrigation 2 _____ (number of acres irrigated)

Other/Remarks _____

Total rate and/or volume of use 0.183 cfs _____ acre feetShow the date water use will be or was resumed under this water right 8/1/01

Person to contact to accompany the Department representative if a field examination is conducted:

Name MIKE WILLARD Telephone No. 949-574-9996Address 970 BUTTERCUP RD ANILEY ID

The above information is my true statement of the extent to which diversion and use of the above described water right has been resumed.

Date 2/02/03 Signature [Signature]