



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

July 21, 2014

PHILIP W BARNHART
PATSY BARNHART
486 KRIPPLE CREEK
ATHOL ID 83801

PROOF DEFICIENCY LETTER

RE: Permit No. 96-9499

Dear Permit Holder(s):

During my review of your statement of completion ("proof") for this water right, I noticed that the license examination fee was not fully paid at the time of filing proof. The license examination fee is based on either the maximum diversion rate or the maximum diversion volume that was developed, **whichever is greater**, and is for the department to conduct a beneficial use field examination of the water system to verify its use.

The permit was issued with a maximum diversion rate of 0.18 cfs(cubic feet per second), or a maximum diversion volume of 29.7 af(acre feet) from surface water. Based on your **maximum diversion volume** of 29.7 af the total exam fee is \$100.00, and the amount still owed is \$50.00.

In addition, Item no. 6 of the proof form is incomplete. I am returning the original form to you and ask that you complete the form and return it to me. To provide you with information regarding the permitted maximum diversion rate and volume for item no.6, enclosed is a copy of your permit along with a license examination fee schedule for your reference.

Your proof statement cannot be processed without submittal of the entire license examination fee. Upon receipt of the additional \$50.00 owed for the license examination, and your completed proof form I will be able to move forward with processing your proof. Please keep in mind that the additional \$50.00 needs to be receipted by the Department no later than the proof due date of August 1, 2014, in order for your proof to be considered as being filed timely.

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

Sincerely,

Darla Block
Technical Records Specialist
Water Allocation Bureau

Enclosure(s)

RECEIVED

JUN 16 2014

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 \$:	30.00
Receipt No.:	NO30494
Receipt By:	[Signature]
Date Received:	6/6/14

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, 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.: 96-9499 Telephone No.: (208) 683 2029
- Name of Permit Holder(s): Philip & Patsy Barnhart
- Mailing Address: 486 Kripple Creek City: Athol
State: Id Zip: 83801 Email: _____
- Source of Water: unnamed stream ☒ GROUND WATER (well), Date Drilled: no / yr
Well Driller: _____ 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): 8 Other: Storage & three
irrigation includes garden
- 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?

If yes, has the measuring device been installed?

Yes ☐	No ☒
Yes ☐	No ☐

Lockable Controlling Device: Is a lockable device required to control the diversion?

If yes, has the lockable device been installed?

Yes ☐	No ☒
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: \$ 50.00 See fee schedule on back of the instructions for filing proof of beneficial use. Proofs 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: Philip Barnhart Telephone Number: (208) 683 2029
Mailing Address: 486 Kripple Creek City: Athol
State: Id Zip: 83801 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: Philip Barnhart Date: 6/6/2014
(Include your title, if on behalf of company or organization)

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