

FEB 13 2012

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

Amt. of Fee \$: 100-
Receipt No. CG94678
Receipt By: SRF
Date Received: 2-13-30

DEPARTMENT OF
WATER RESOURCES

1. Permit No.: 65-23375 Telephone No.: 208 634-7125

2. Name of Permit Holder(s): State of Idaho Dept. of Lands

3. Mailing Address: 555 Deinhard Lane City: McCall

State: ID Zip: 83638 Email: skeafer@idl.idaho.gov

4. Source of Water: Paddy 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: commercial

6. Total rate of diversion or storage volume for which proof is submitted: 0.78 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?
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 ☒

8. Fee Enclosed: \$ 100.00 See fee schedule on back of the instructions for filing proof of beneficial use.
Proofs filed without an appropriate fee, will be considered incomplete.

9. Person to contact to accompany the Department representative during field examination of the water system.

Name: Howard Wright Telephone Number: 208 634-7125

Mailing Address: 555 Deinhard Lane City: McCall

State: Id Zip: 83638 Email: hwright@idl.idaho.gov

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.

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Signature of permit holder: Sheldon W. Keifer - Area Manager Date: 12/21/11
(Include your title, if on behalf of company or organization)

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

IDAHO DEPT OF LANDS
Payette Lakes Area Office
555 Deinhard Lane
McCall, ID 83638

RECEIVED

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DEPARTMENT OF
WATER RESOURCES

ID DEPT OF WATER RESOURCES
PO BOX 83720
BOISE ID 83720-0098



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02/08/12

Mailed From 83638

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