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DEPT. OF WATER RESOURCES
SOUTHERN REGIONSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 50-Receipt No. 8033514Receipt By: DMDate Received: 9-11-2013

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.

1. Permit No.: 37-22744 Telephone No.: (623)386-72822. Name of Permit Holder(s): Holly Farms, LTD., An Arizona Limited Partnership3. Mailing Address: 20051 W. Hwy 85 City: BuckeyeState: AZ Zip: 85326 Email: _____4. Source of Water: Groundwater If **GROUND WATER** (well), Date Drilled: mo. _____ / yr. 1890Well Driller: NA Drilling Permit Number: NA

5. Extent of use(s) completed (as authorized by the water right permit):

Domestic (No. of households): 1 Stockwater (No. and type of stock): 100 cattle, 20 horses, 200 sheep

Irrigation (No. of acres): _____ Other: _____

6. Total rate of diversion or storage volume for which proof is submitted: 0.18 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 ☐**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 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: Lita West Telephone Number: 208-481-1411Mailing Address: P.O. Box 100 City: CareyState: ID Zip: 83320 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: [Signature] general partner Date: 8-31-13
(Include your title, if on behalf of company or organization)

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



Registered Name

Information Search

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Instructions

General Information

File ID	2016963
Description	Limited Partnership
Status	Active
Name	HOLLY FARMS, LTD.
Address 1	C/O DALLAS A. HOLLY
Address 2	APACHE CO. RD-N 4037 HOUSE #61
City	SOUTHFORK
State	AZ
ZIP	85925-
State Of Origin	AZ

Agent/Owner Information

Agent ID	Type	Fullname	Address	City	State	ZIP	Phone
1220485	General Partner	DETMAR D HOLLY	20051 WEST HIGHWAY 85	BUCKEYE	AZ	85326-	
1220488	General Partner	FRITZ L HOLLY	20051 WEST HIGHWAY 85	BUCKEYE	AZ	85326-	
1220492	Service of Process	DETMAR D HOLLY	20051 WEST HIGHWAY 85	BUCKEYE	AZ	85326-	623-386-7282

Registration Information

Tradename and Trademark Department
Registration Information

Received	Amended	Assigned	Expiration	Cancelled	Revoked
3/13/2000	5/6/2013				

Correspondence History

Description	Date	Printed	Filmed	Loc. No.	Page No.	Pages
Amendment	5/6/2013					3
Amendment	3/16/2006					1
Amendment	3/13/2000	3/13/2000	3/13/2000	00005550	20	1
Application	3/13/2000	1/5/2001				

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Please email your comments or questions regarding this system to trades@azsos.gov. We appreciate any feedback.

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