

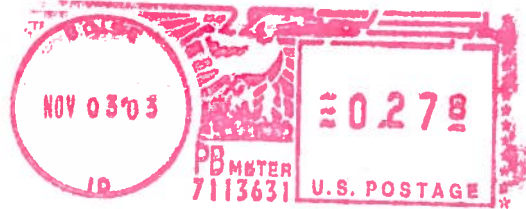
STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

Return Service Requested

RECEIVED
NOV 10 2003
Department of Water Resources

DAVE OWEN
COMMITTEE MEMBER
SOUTH FORK BOISE RIVER ASSO
710 E RIVER VIEW CIRCLE
PINE ID 83547

PRESORTED
FIRST CLASS



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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

November 3, 2003

US DEPT OF INTERIOR
BUREAU OF LAND MANAGEMENT
3948 DEVELOPMENT AVE
BOISE ID 83705

PROOF ACKNOWLEDGMENT LETTER

RE: PERMIT NO. 63-31503

Dear Permit Holder:

The department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the department to contact you to schedule a field examination to determine and confirm the use being made of the water, and that it meets the permitted beneficial use.

Be advised that Section 42-248, Idaho Code, requires you or the owner of these water rights to maintain current ownership and address records on file with the department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any department office, or at the department's website at: www.idwr.state.id.us.

If you have questions, please contact the **Western** Regional Office of the department in Boise (208) 334-2190.

Sincerely,

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Encl.

c: IDWR - Regional Office (w/encl.)
✓ Dave Owen, South Fork Boise River Asso.

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JUL 17 2003

Department of Water Resources

FOR OFFICE USE ONLY

Amt. of Fee \$: _____

Receipt No. _____

Receipt By: _____

Date Received: 7-15-03

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

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JUL 15 2003

WATER RESOURCES
WESTERN REGION

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee, when necessary, or be accompanied by a completed field examination report prepared by a certified water right examiner.

1. Permit No. 63-31503 Telephone No. (208) 384-3300

2. Name of Permit Holder(s): Bureau of Land Management

3. Mailing Address: 3948 Development Avenue

City Boise State ID Zip 83705

4. Source of Water: Groundwater If **GROUNDWATER** (well), Date Drilled: mo. 07 / yr. 01

Well Driller: Hiddleston Drilling Drilling Permit Number: _____

5. Use(s) (as authorized by the water right permit):

Domestic (No. of households): 1 Stockwater (No. and type of stock): _____

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

6. Total rate of diversion and/or volume for which proof is submitted: 0.04 cfs OR _____ acre-feet

7. Measuring Device Requirement: (refer to the approval conditions on your permit and respond accordingly)

(This question is **not optional**. Please check either yes or no. Proofs returned not checked accordingly, will be considered incomplete)

Measuring Device: Is a measuring device required?

Yes _____ or No X

Has the measuring device been installed?

Yes _____ or No X

8. Fee Enclosed: \$ (*) (See Fee Schedule on back of the instructions for filing proof of beneficial use)

(*) Fee to be paid by the Senior Center, South Fork Boise River Assc, Pine, ID

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

Name: Dave Owen, Committee Member Telephone Number: (208) 653-2359

Address: So. Fork Boise River Assc., 710 E. River View Circle, Pine, ID 83547

10. *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. I agree to relinquish any undeveloped portion of the permit to the State of Idaho.*

Signature of permit holder: Michael Austin PH, 384-3339
(include your title, if on behalf of company of organization)

Realty Specialist
Bureau of Land Management

Date: 7-15-03