

FACSIMILE COVER SHEET

RECEIVED

JUN 09 2010

DEPARTMENT OF WATER RESOURCES

TO.....: Dept of Water Resources
ATTN Darla Block
FROM.....: Blaine Price (208) 287-6700

DATE SENT: 7/9/10

Pages
~~TIME SENT~~: 11

Message/Comments:

Info requested - Lapsed Permit 15-7187

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Please let us know if you need more info

JoAnn Price

Blaine Price
6555 N Old Hwy 191
Malad City, ID 83252

July 9, 2010

VIA FAX: (208) 287-6700

Darla Block
Technical Records Specialist
Water Allocation Bureau
322 Front Street
P. O. Box 83720
Boise, Idaho 83720-0098

RE: Lapsed Permit No. 15-7187

Dear Ms. Block:

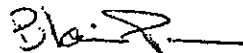
This letter is to try to explain delinquent replies to your letters.

First, due to several health problems in the last five years, I have had many things get behind and not only paperwork. So when I was able to work, I was trying to do too many things to catch up. Your letters were buried in a pile of others. Second, my wife and I have had marriage problems and separated for a few months during the last three years.

Enclosed is the well driller's report and for pumping records are enclosed the payments made to the power company for electrical use of the well which run on normal years continuous from June to October.

I hope we can over come these due dates and finally get this well completely licensed. The springs that once supplied all my irrigation needs have been flowing so low the last five years that I would not be able to water anything without this well.

With Sincere Regrets,



Blaine Price

Form No. 217
1/08

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

FOR OFFICE USE ONLY
Amt. of Fee \$: _____
Receipt No. _____
Receipt By: _____
Date Received: _____

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has completed all work that will occur for the development of a water right and that water has been applied to beneficial use(s) to the extent described below. This form must be accompanied by a license examination fee, when necessary, or accompanied by a completed Beneficial Use Field Report prepared by a certified water right examiner. If you no longer own the property and want to convey this permit to the new owner, please complete an Assignment of Permit form and send it to the Department with a \$25.00 filing fee. Assignment forms are available from any Department office or at www.idwr.idaho.gov.

- Permit No. 15-7187 Telephone No. 208-766-5200
- Name of Permit Holder(s): Blaine Price
- Mailing Address: 6555 N. Old Hwy 191 City Malad
State Id. Zip 83252 Email: LARRY-E@ATCNET.NET
- Source of Water: well If GROUND WATER (well), Date Drilled: mo. MAY / yr. 2001
Well Driller: Vallmire Well Drilling Drilling Permit Number: Tag # D0014895
15-07187
- 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): 200 Other: _____
- Total rate of diversion or storage volume for which proof is submitted: 350 gal cfs OR _____ acre-feet.
- Compliance with a Measuring Device requirement and/or other Conditions of Permit: (Refer to the approval conditions on your permit and respond accordingly.)
Measuring Device: Is a measuring device required? Yes ☐ or No ☒
If yes, has the measuring device been installed? Yes ☐ or No ☒
Conditions of Permit: Does your permit require you to submit additional information in connection with your proof of beneficial use? (If yes, please list the conditions below and provide documents if necessary.)

Completed? Yes ☐ or No ☒

Completed? Yes ☐ or No ☒
- Fee Enclosed: \$ 25.00 + 75.00 = 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.)
- Person to contact to accompany the Department representative during field examination of the water system.
Name: Blaine Price Telephone Number: 766-5200
Mailing Address: 6555 N. Old Hwy 191 City Malad
State Id. Zip 83252 Email: LARRY-E@ATCNET.NET

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 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: _____

(include your title, if on behalf of company or organization)

Date: July 31, 2008

Pacific Power/Rocky Mountain Power**Payment Request Submitted****Payment 1**

Reference ID: **73601166052**

Payment Status: **Payment Submitted**

Date and time:
(mm/dd/yyyy) **06/01/2009 10:10:54 (CDT)**

Account Number: **62354426-004 4**

Payment Amount: **\$407.21**

Payment date:
(mm/dd/yyyy) **06/01/2009**

Payment method: **Checking ****3919**

Pacific Power/Rocky Mountain Power

Payment Request Submitted

Payment 1

Reference ID: **75821253052**

Payment Status: **Payment Submitted**

Date and time:
(mm/dd/yyyy) **08/04/2009 10:10:04 (CDT)**

Account Number: **62354426-004 4**

Payment Amount: **\$1,335.80**

Payment date:
(mm/dd/yyyy) **08/04/2009**

Payment method: **Checking ****3919**

well

Pacific Power/Rocky Mountain Power



Payment Request Submitted

Payment 1

Reference ID: **63878559052**
Payment Status: **Payment Submitted**
Date and time:
(mm/dd/yyyy) **10/29/2008 23:09:09 (CDT)**

Account Number: **62354426-004 4**

Payment Amount: **\$3,173.28**
Payment date:
(mm/dd/yyyy) **10/29/2008**

Payment method: **Checking ****3919**

Pacific Power/Rocky Mountain Power

Payment Request Submitted

Payment 1

Reference ID: **62669079052**

Payment Status: **Payment Submitted**

Date and time:
(mm/dd/yyyy) **10/04/2008 12:14:32 (CDT)**

Account Number: **62354426-004 4**

Payment Amount: **\$750.00**

Payment date:
(mm/dd/yyyy) **10/04/2008**

Payment method: **Checking ****3919**

30 days
3,000
1,791.92

\$3,085.25

2541.92
150
\$1,791.92

Pacific Power/Rocky Mountain Power

Payment Request Submitted

Payment 1

Reference ID: **59714893052**

Payment Status: **Payment Submitted**

Date and time:
(mm/dd/yyyy) **08/06/2008 12:55:36 (CDT)**

Account Number: **62354426-004 4**

Payment Amount: **\$2,373.91**

Payment date:
(mm/dd/yyyy) **08/06/2008**

Payment method: **Checking ****3919**

Pacific Power/Rocky Mountain Power



Payment Request Submitted

Payment 1

Reference ID:

58229880052

Payment Status:

Payment Submitted

Date and time:
(mm/dd/yyyy)

07/06/2008 23:26:33 (CDT)

Account Number:

62354426-004 4

Payment Amount:

\$288.86

Payment date:
(mm/dd/yyyy)

07/06/2008

Payment method:

Checking ***3919**



