



## 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 • Web Site: [www.idwr.idaho.gov](http://www.idwr.idaho.gov)

January 11, 2010

C. L. "BUTCH" OTTER  
Governor

GARY SPACKMAN  
Interim Director

MICHAEL CAMPBELL  
9378 WRIGHT RD  
MELBA ID 83641

### PROOF DEFICIENCY LETTER

**RE: PERMIT NO. 57-11672**

Dear Permit Holder:

This letter is to inform you that the license examination fee was not paid at the time of filing the proof form. The license examination fee is based on the maximum rate of diversion that was developed, and is for the department to conduct a beneficial use field examination of the water system to verify its use. Your proof statement cannot be accepted without an exam fee. The permit was issued with a maximum diversion rate of 0.14 cfs, from groundwater. Based on your maximum diversion rate of 0.14 cfs, the license examination fee is \$50.00.

During my review of your proof statement and the permit for this water right, I found that the permit allows a diversion rate of 0.14 cfs. According to the proof statement you submitted you stated that you are diverting 0.20 cfs. You also listed the number of acres being irrigated as 5. You are only permitted for 4 acres of irrigation under this permit. If you are diverting at a higher rate than this permit allows, a new application for permit for the additional amount being used must be filed.

Enclosed is the original Proof of Beneficial Use ("proof") form you filed with the department on January 06, 2010. I am returning it to you and request that you change the form to reflect a rate equal to or less than the amount permitted, and the number of acres allowed for irrigation under this permit. After you have made these changes to the form, please return it to me in the enclosed self-addressed stamped envelope.

Please submit the license examination fee required. Upon receipt of the appropriate exam fee along with a revised proof statement, the department will then be able to process your proof of beneficial use ("proof"). I will hold this matter for your response for fifteen (15) days from the date of this letter. Enclosed is a copy of this permit for your reference, along with instructions for filing proof and the filing fee schedule.

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

Sincerely,

Darla Block  
Technical Records Specialist

Enclosure(s)

RECEIVED

JAN 06 2010

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

FOR OFFICE USE ONLY

Amt. of Fee \$: 0.00Receipt No. 587Receipt By: SLDate Received: 1/6

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](http://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.: 57-11672 Telephone No.: 208-896-4257
2. Name of Permit Holder(s): MICHAEL K CAMPBELL
3. Mailing Address: 9378 WRIGHT RD City: MEIDA  
State: ID Zip: 83641 Email: ATVTRACKSHOP@HOTMAIL.COM
4. Source of Water: GW (WELL) If GROUND WATER (well), Date Drilled: mo. 8 / yr. 2006  
Well Driller: DUFDE WELL DRILLING Drilling Permit Number: 57-11672
5. Extent of use(s) completed (as authorized by the water right permit):  
Domestic (No. of households): NO Stockwater (No. and type of stock): YES  
Irrigation (No. of acres): 5 Other: \_\_\_\_\_
6. Total rate of diversion or storage volume for which proof is submitted: 0.20 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 ☐

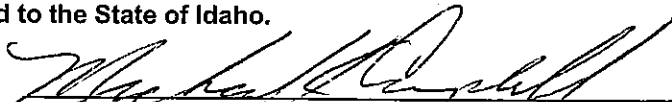
8. Fee Enclosed: \$ \_\_\_\_\_ See fee schedule on back of the instructions for filing proof of beneficial use. Proofs filed without an appropriate fee, will be considered incomplete.

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

Name: MICHAEL CAMPBELL Telephone Number: 208-896-4257Mailing Address: 9378 WRIGHT RD City: MEIDAState: ID Zip: 83641 Email: ATVTRACKSHOP@HOTMAIL.COM

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: 1-4-10

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