



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 www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Interim Director

August 07, 2009

KAREN LEE PETERSON
RODNEY GRANT PETERSON
2785 N 1500 W
PRESTON ID 83263

RE: PERMIT NO. 13-7703

Dear Permit Holder:

The department has received your Statement of Completion for proof of beneficial use ("proof") for the above referenced permit. Upon receipt of your proof for this water right, I noticed the proof form you submitted is incomplete. More specifically, part 6 of this form has not been filled out. Once you have listed the total rate of diversion for which proof is being submitted, your proof of beneficial use form can be accepted and processed with the Department. Be aware that your proof due deadline is still September 01, 2009, and your proof form must be returned to us on or before that date.

Enclosed is the original Statement of Completion ("proof") form you filed. I am returning it to you and request that you fill out part 6 of the form to reflect what was permitted. I am also enclosing a copy of the permit to assist you in completing the proof form. After you have completed the form, please return it to me in the enclosed self-addressed, stamped envelope. Upon receipt of a completed proof statement, I will acknowledge its receipt.

If you have any questions regarding this letter, my phone number is (208)287-4945.

Sincerely,

A handwritten signature in cursive script that reads "Darla Block".

Darla Block
Technical Records Specialist
Water Allocation Bureau

Enclosures

STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$:

Receipt No. 6587

Receipt By: [Signature]

Date Received: 7/28/09

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.

1. Permit No. 13-7203 Telephone No. 208-251-1466

2. Name of Permit Holder(s): Karen Lee Peterson / Rodney Grant Peterson

3. Mailing Address: 2785 N. 1500 W. City Preston

State Id Zip 83263 Email: indianknoll@plmco.com

4. Source of Water: Spring 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): 1 Stockwater (No. and type of stock): _____

Irrigation (No. of acres): 1/2 less than Other: _____

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

7. 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?

If yes, has the measuring device been installed?

Yes ☐ or No ☒

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 ☒

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: Rodney Grant Peterson Telephone Number: 208-251-1466

Mailing Address: 2785 N. 1500 W. City Preston

State Id Zip 83263 Email: indianknoll@plmco.com

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: Karen L. Peterson Date: 7/28/09
(include your title, if on behalf of company or organization)