



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

C. L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Director

December 30, 2008

BRENT BALDWIN
SHARON BALDWIN
8100 WESTRIDGE LN
EMMETT ID 83617

RE: PERMIT NO. 65-22818

Dear Permit Holder:

The department has received your Statement of Completion for proof of beneficial use ("proof") for the above referenced permit. During my review of your proof and the permit for this water right, I found that the permit allows a diversion rate of 0.30 cfs. According to the proof you submitted you are diverting 2.8 cfs. I have enclosed a copy of the permit for your information.

Enclosed is the original Statement of Completion form you filed. 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. After you have made the change to the form, please return it to me in the enclosed self-addressed, stamped envelope. Upon receipt of a revised proof statement, I will acknowledge its receipt, refund the overpayment of the fee, and issue a response accepting your request for waiver of a measurement devise.

I will hold this matter for **15-days** for your return of the proof statement. If I do not hear from you within that time, I will refund the filing fee you paid and lapse the permit.

If you have any questions regarding this letter, my phone number is (208)287-4942.

Sincerely,

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Enclosures

RECEIVED

SEP 03 2008

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCESSTATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 150.00

Receipt No. 008417

Receipt By: [Signature]

Date Received: 9/2/08

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. 65-22818 Telephone No. (208) 584-32232. Name of Permit Holder(s): Brent Baldwin And Sharon Baldwin3. Mailing Address: 8100 Westridge LN City EMMETTState Id Zip 83617 Email: _____4. Source of Water: Squaw Creek 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): _____ Stockwater (No. and type of stock): _____

Irrigation (No. of acres): 15 Other: _____6. Total rate of diversion or storage volume for which proof is submitted: 2.8 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.)

Letter from Water Master

Completed?

Yes ☒ or No ☐Dated 9-1-08

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: Brent Baldwin Telephone Number: (208) 584-3223Mailing Address: 8100 West Ridge Lane City EMMETTState Id Zip 83617 Email: _____

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: Brent Baldwin Date: 9-2-08
(include your title, if on behalf of company or organization)