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AUG 26 2008

DEPARTMENT
WATER RESOURCES

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No.: 003849
Receipt By: JU-024
Date Received: 8-22-08

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

PROOF OF BENEFICIAL USE

AUG 22 2008

WATER RESOURCES
WESTERN REGION

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. 2-10303 Telephone No. 896-4324
2. Name of Permit Holder(s): Garland Smith & Zola Smith-Garland
Smith Trust
3. Mailing Address: 5476 Market Rd
City Marsing State ID Zip 83639
4. Source of Water: Snake River If GROUNDWATER (well), Date Drilled: mo. _____ / yr. _____
Well Driller: _____ Drilling Permit Number: _____

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

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

Irrigation (No. of acres): 3.9 5 acres Other: _____

6. Total rate of diversion and/or volume for which proof is submitted: .12 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 _____

8. Fee Enclosed: \$ 50⁰⁰ (See Fee Schedule on back of the instructions for filing proof of beneficial use)

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

Name: Garland Smith Telephone Number: 896-4324

Address: 5476 Market Rd Marsing, ID 83639

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: M Garland Smith Date: 7/14/07
(include your title, if on behalf of company or organization)
Zola Smith