

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

PROOF OF BENEFICIAL USE

SEP 26 2008
DEPT. OF WATER RESOURCES
SOUTHERN 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. 43-13518 Telephone No. 480-947-3100
2. Name of Permit Holder(s): MICHAEL MERRIMAN-ALBION RANCH 2006 LLC
3. Mailing Address: 7595 EAST McDONALD DR. STE 130
City SCOTTSDALE State AZ Zip 85250
4. Source of Water: CREEK DRAINAGE 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): 180 RANGE CATTLE
Irrigation (No. of acres): _____ Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR 0.2 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 X

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. (CEU) 208-
Name: CLAIR TEETER Telephone Number: 208-638-5522 312-0259
Address: 1355 E 1750 SO MALTA IDAHO 83342

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: Michael Merriman manager Date: 9-26-08
(include your title, if on behalf of company or organization)