



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

May 29, 2008

DAVID R. TUTHILL, JR.
Director

SUE BEITIA
EMMETT SCHOOL DISTRICT
601 E 3RD ST
EMMETT ID 83617

RE: PERMIT NO. 65-23037

Dear Ms. Beitia:

Enclosed is the Proof of Beneficial Use ("proof") form you filed with the department on May 20, 2008. The department cannot accept this document without the appropriate license examination fee of \$50.00. Should you have any questions about the fee, I am enclosing the instructions and fee schedule that was provided with the Proof Notice letter.

Please resubmit the form with the appropriate fee before the **March 1, 2009** proof deadline. If I do not receive the form and the filing fee on or before the proof deadline, the permit will lapse and be of no force nor effect.

Additionally, the Department requires that the title of the person signing the proof be provided when signing on behalf of a company or organization. Please provide your title next to your signature on the form. If you do not have authority to sign on behalf of the Emmett School District, please have someone else sign the document and provide their title.

If you have any questions, please contact me at (208) 287-4942.

Sincerely,

A handwritten signature in black ink that reads "Deborah J. Gibson". The signature is written in a cursive, flowing style.

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Enclosure

RECEIVED
MAY 20 2008

WATER RESOURCES
WESTERN REGION

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY
Date of Filing: _____
Receipt No. _____
Receipt By: _____
Date Received: _____

RECEIVED

MAY 22 2008
DEPARTMENT OF
WATER RESOURCES

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. 65-23037 Telephone No. 365-6301
2. Name of Permit Holder(s): Emmett School District
3. Mailing Address: 601 E. 3rd Street
City Emmett State Idaho Zip 83617 Email: slbeitia@isd221.net
4. Source of Water: Ground water If GROUNDWATER (well), Date Drilled: mo. 2 / yr. 00
(Firewell) (Domestic)
Well Driller: Riverside, inc. / Stevens & Sons Drilling Permit Number: 65-99W-0118-001
5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): 1 school Stockwater (No. and type of stock): _____
Irrigation (No. of acres): 8 Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: 16 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 X or No _____
Has the measuring device been installed? Yes X or No _____
8. Fee Enclosed: \$ 50.00 (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: Mike Fisher Telephone Number: 365-8648
Address: 722 Wardwell, Emmett, Idaho 83617

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:

Sue Beitia

(include your title, if on behalf of company or organization)

Date:

5/19/08