

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

RECEIVED

JAN 09 2008

FOR OFFICE USE ONLY
Amt. of Fee \$ 100.00
Receipt No. 0085666
Date Received 1.9.08

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has/have completed a development that will occur under this permit and that water has been applied according to the provisions of the permit (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. 57-11618 Telephone No. 208-896-4800 or 896-4141

2. Name of Permit Holder(s): Paulette A. Wallin

3. Mailing Address: P.O. Box 130, 5556 Buntrock Rd.

City Marsing State Id Zip 83639

4. Source of Water: Well If GROUNDWATER (well), Date Drilled: mo. 10 / yr. 2001

Well Driller: Treasure Valley Drilling Permit Number: DO018784

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

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

Irrigation (No. of acres): _____ Other: Commercial / Fire Protection

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

Has the measuring device been installed? Yes _____ or No _____

8. Fee Enclosed: \$ 100.00 (See Fee Schedule on back of the instructions for filing proof of beneficial use)

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

Name: Paulette Wallin Telephone Number: 208-896-4141

Address: P.O. Box 130 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: Paulette A. Wallin Date: 1.8.08

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