

Form No. 217
05/03FOR OFFICE USE ONLY
Amt. of Fee \$: _____
Receipt No. _____
Receipt By: _____
Date Received: _____STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

NOV 09 2007

DEPARTMENT OF
WATER RESOURCES

PROOF OF BENEFICIAL USE

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. Floyd + Mickie McGhee 96-92-04 Telephone No. 208-265-44402. Name of Permit Holder(s): Floyd + Mickie McGhee Same Kootenai Heights Water System.3. Mailing Address: PO Box 1925City Sandpoint State Idaho Zip 838644. Source of Water: Ground Water. If GROUNDWATER (well), Date Drilled: mo. 11 / yr. '04'Well Driller: Brenson Wells. Drilling Permit Number 00035587

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

Domestic (No. of households): 11 Stockwater (No. and type of stock): None ✓Irrigation (No. of acres): None Other: None6. Total rate of diversion and/or volume for which proof is submitted: 0.04 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: \$ NA (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: Bob Hansen (Water Systems Mgt., Inc.) Telephone Number: (208) 265-4270Address: 67 Wild Horse Trail, Sandpoint, ID 83864

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:

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

Date: 11-5-07-