

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
PROOF OF BENEFICIAL USE RECEIVED
2007

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. 98-7856 Telephone No. (208) 265-0421 or 267-3897

2. Name of Permit Holder(s): DANIEL H. DEISS AND/OR GWLADYS E. DEISS

3. Mailing Address: 3681 WESTMOND ROAD

City SAGLE State ID Zip 83860

4. Source of Water: MOYIE 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): 1.5 AC. (.05 CFS) Other: DIVERSION TO STORAGE: (.05 CFS; 1.5 AF)
WILDLIFE STORAGE: (.1 AF)

6. Total rate of diversion and/or volume for which proof is submitted: 0.05 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 _____ or No X

* PERMIT STATES DEVICE IS REQUIRED * WHEN NOTIFIED BY THE DEPARTMENT. NO NOTIFICATION HAS BEEN GIVEN BY THE DEPARTMENT

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: DANIEL DEISS Telephone Number: (208) 265-0421

Address: 3681 WESTMOND ROAD SAGLE, ID 83860

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: Daniel H. Deiss
Gwladys E. Deiss
(include your title, if on behalf of company or organization)

Date: SEPT. 12, 2007