



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

September 6, 2007

C. L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Interim Director

JIM CARROLL
1847 GARFIELD BAY CUTOFF RD
SAGLE ID 83860

Re: Permit No. 96-9241

Dear Mr. Carroll:

The Department of Water Resources received your Proof of Beneficial Use ("proof") on July 31, 2007. On August 2, 2007, the Department issued an acknowledgement of its acceptance of the proof. However, on August 27, 2007 you filed a Request for Extension of Time ("request") and stated that NRCS had changed the dam specifications for your storage pond and that you require additional time to complete the modifications.

Enclosed is a copy of the approved request for extension of time submitted in connection with the above referenced permit extending the proof due date to **September 1, 2010**. Please note that the department granted this extension based on evidence of good cause. It is important that you work diligently toward the completion of this project during the construction period allowed.

Additionally, because you have withdrawn the proof you filed on July 31, 2007, I am returning the proof and with this letter asking that the filing fee be refunded to you. This check will be mailed to you within 7 to 10 days.

Section 42-248, Idaho Code requires you or the owner of this water right to maintain current ownership and address records on file with the department. Please contact any office of the department for the proper form to file a change of ownership of a water right and/or a change in the address of the owner. Additionally, these forms can be found on our website at:
<http://www.idwr.idaho.gov>

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

Sincerely,

A handwritten signature in cursive script that reads "Deborah J. Gibson". The signature is written in dark ink and is positioned above the printed name and title.

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Enclosures
cc: Fiscal

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. C084662
Receipt By: KAW
Date Received: 7/31/07

STATE OF IDAHO
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. 96-9241 Telephone No. 208 263 6002

2. Name of Permit Holder(s): JIM CARROLL

3. Mailing Address: 1847 GARFIELD BAY CUTOFF RD
City SALT LAKE State UT Zip 83860
withdrawn

4. Source of Water: S GROUNDWATER (well), Date Drilled: mo. _____ / yr. _____

Well Driller: _____ Drilling Permit Number: _____

5. Use(s) (as authorized)

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

Irrigation (No. of acres): _____ Other: WILDLIFE STORAGE

6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR 4 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: \$ 50 (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: JIM CARROLL Telephone Number: 208 263 6002 OR

Address: 1847 GARFIELD BAY CUTOFF RD 4802477121

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: [Signature] Date: 7/23/07
(include your title, if on behalf of company or organization)