

Amt. of Fee \$: 50.00
Receipt No. 208-4649
Receipt By: 208-4649 amb
Date Received: 7-27-07

RECEIVED

JUL 27 2007

DEPARTMENT OF
WATER RESOURCES

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. 95-09122 Telephone No. 208-773-8279
2. Name of Permit Holder(s): W. BRANT MORRIS
3. Mailing Address: W. 9889 GALLOP LANE
City POST FALLS State ID Zip 83854
4. Source of Water: GROUND WATER If GROUNDWATER (well), Date Drilled: mo. 08 / yr. 2001
Well Driller: UNITED DRILLING INC Drilling Permit Number: DC0017645
5. Use(s) (as authorized by the water right permit):

Domestic (No. of households): _____ Stockwater (No. and type of stock): _____
Irrigation (No. of acres): 5 1/2 Other: RECREATION STORAGE "POND"

6. Total rate of diversion and/or volume for which proof is submitted: 0.20 cfs OR 7.3 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: \$ 50.00 (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: W. BRANT MORRIS Telephone Number: 208-773-8279 HOME
208-773-8370 OFFICE
Address: W. 9889 W. GALLOP LANE POST FALLS, IDAHO

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: 7-24-07
(include your title, if on behalf of company or organization)