

FOR OFFICE USE ONLY
Amt. of Fee \$: 100.00
Receipt No. 2081931
Receipt By: AMB
Date Received: 8-14-06

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES RECEIVED

PROOF OF BENEFICIAL USE

AUG 14 2006

DEPARTMENT OF
WATER RESOURCES

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. 47-17124 Telephone No. 208-655-4225

2. Name of Permit Holder(s): City of Hollister

3. Mailing Address: 2392 Main Avenue

City Hollister State ID Zip 83301

4. Source of Water: ground water If **GROUNDWATER** (well), Date Drilled: mo. 10 / yr. 2004

Well Driller: Eaton Drilling Drilling Permit Number: - - 82 - 13 - 43

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: Municipal

6. Total rate of diversion and/or volume for which proof is submitted: 0.56 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 X or No

8. Fee Enclosed: \$ 100.00 (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: Mayor Dixie Choate Telephone Number: 208-308-6041

Address: 2392 Main Hollister, ID 83301

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: Dixie Choate Mayor Date: 7/31/06
(include your title, if on behalf of company or organization)