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SEP 14 2006

Form No. 217
05/03DEPARTMENT OF
WATER RESOURCES

FOR OFFICE USE ONLY

Amt. of Fee \$: 50.00
Receipt No. 2088175
Receipt By: AMB
Date Received: 9.14.06STATE 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.

- Permit No. 15-7246 Telephone No. 208-766-5177
- Name of Permit Holder(s): JIM AND JOANNE ADAMSON
- Mailing Address: 1583 S 5800 W
City MACAD State ID Zip 83252
- Source of Water: Well If **GROUNDWATER** (well), Date Drilled: mo. Nov yr. 03
Well Driller: MIKE FRANKEN Drilling Permit Number: ~~15-7246~~ 807270
WELL-TAG D0027942
- Use(s) (as authorized by the water right permit):
Domestic (No. of households): _____ Stockwater (No. and type of stock): _____
Irrigation (No. of acres): 22 AC Other: _____
- Total rate of diversion and/or volume for which proof is submitted: 0.20 cfs OR _____ acre-feet
- 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 X
Has the measuring device been installed? Yes _____ or No _____
- Fee Enclosed: \$ 50.00 (See Fee Schedule on back of the instructions for filing proof of beneficial use)
- Person to contact to accompany the Department representative during field examination of the water system.
Name: JIM ADAMSON Telephone Number: 208-766-5177
Address: 1583 S. 5800 W MACAD ID 83252
- 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:

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

Date:

7-21-06