

RECEIVED

DEC 20 2006

DEPARTMENT OF
WATER RESOURCES

Form No. 217
600

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. 208-265-0295
Receipt By: [Signature]
Date Received: 12-20-06

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. 96-9202 Telephone No. 208-265-0295 208-610-1800 (C)

Name of Permit Holder(s): Ronald & Linda Muskoie

3. Mailing Address: P.O. Box 127 Physical: 45 TOMAHAWK Trail
City: OREGONIA State: ID Zip: 83813 Co @ 11/14, ID 83813

4. Source of Water: OREGONIA LAKE If GROUNDWATER (well), Date Drilled: mo. _____ 1 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): 16 Other: WE HAVE 3.7 ACRES - But only use canal Home
for fire protection

6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR _____ acre-foot

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. Permits 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)

Person to contact to accompany the Department representative during field examination of the water system.

Name: RON OR LINDA Muskoie Telephone Number: 208-265-0295

Address: P.O. Box 127 45 TOMAHAWK Trail OREGONIA, ID 83813

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: 11/21/06
(Include your title, if on behalf of company or organization)

Applicant for beneficial use permit
And I receive an Extension.

Thanks for your assistance,

[Signature]

No. 2191 P. 2

Idaho Dept of Water Resources

Nov. 21, 2006 4:31PM