Form No. 217
05/03

FOR OFFICE USE ONLY
Amt. of Fee $: 50.00
Receipt No. C0231356
Receipt By: KAW
Date Receipted: 5/30/06

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED
MAY 30 2006
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. 94-7403 Telephone No. 208-744-1526
2. Name of Permit Holder(s): Wayne A. and/or Elma P. Chambers
3. Mailing Address: P.O. Box 551
   City Mullan State ID Zip 83846-0551
4. Source of Water: Willow Creek If **GROUNDWATER** (well), Date Drilled: mo.____ / yr.____
   Well Driller: ____ Drilling Permit Number: ____
5. Use(s) (as authorized by the water right permit):
   Domestic (No. of households): 1 Stockwater (No. and type of stock): ____
   Irrigation (No. of acres): 1-3 Other: ____
6. Total rate of diversion and/or volume for which proof is submitted: ____ 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 ____ 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: Wayne or Elma Chambers Telephone Number: (208) 744-1526 or (208) 682-5335 cell
   Address: 699 Friday Avenue, Mullan, ID 83846-0551
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: Elma P. Chambers Date: 5/26/06
(include your title, if on behalf of company or organization)