

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. 2083652
Receipt By: AMM
Date Received: 3-23-07

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

PROOF OF BENEFICIAL USE

MAR 23 2007

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. 63-12530 Telephone No. 208-286-9346
2. Name of Permit Holder(s): Joseph E Gallia - Laura H. Gallia
3. Mailing Address: 4082 Parmigan Pl.
City Star State ID Zip 83669
4. Source of Water: Well If GROUNDWATER (well), Date Drilled: mo. June / yr. 02
Well Driller: SOS Welldrilling + Pump Co. Drilling Permit Number: D0025103
Permit No. 63-12530
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): 5 Other: Both 1 domestic and 5 acres Irrigation
6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR _____ acre-feet
45 gpm 5 acres
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: Joe Gallia Telephone Number: (208) 286-9346
Address: 4082 Parmigan Pl. Star, Idaho 83669
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: Joe E. Gallia Date: 2/24/07
(include your title, if on behalf of company or organization)