

IDAHO DEPARTMENT OF WATER RESOURCES

FAX

To: Mike Auer

From: Deborah J. Gibson
(208) 287-4942

Fax: 509-751-9545

Date: November 2, 2006

Phone:

Pages: 4

Re: Proof of Beneficial Use for 86-11909

CC:

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

☐ Please Recycle

Attached for your information is the Proof of Beneficial Use you filed on Aug. 2, 2006, and the Permit for no. 86-11909. Acknowledgement of this proof has been held because of uses (see paragraph no. 5) that do not match the permitted uses. Please make any changes that do not reflect the actual development you have completed for this water right. Also, please initial the changes you make to the proof. Then return the amended proof to my attention by fax, 208-287-6700.

Please contact me at the above number if you have any problems with the transmission of this fax, or if you have any questions.

Thank you for contacting me. I apologize for the delay in resolving this matter.

RECEIVED

AUG 02 2006

DEPARTMENT OF
WATER RESOURCES
STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. _____
Receipt By: AMM
Date Received: 8/2/06

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. 86 11909 Telephone No. 509-758-5533

2. Name of Permit Holder(s): Mike Auer

3. Mailing Address: 1275 Highland Ave

City Clarkston State WA Zip 99403

4. Source of Water: spring 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): _____ Stockwater (No. and type of stock): 100 head cattle

Irrigation (No. of acres): 30 Acres Other: _____

6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR 11 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?
Has the measuring device been installed?

Yes _____ or No ☒
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: Mike Auer Telephone Number: 509-758-5533

Address: 1275 Highland Ave. Clarkston, WA.

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: Mike Auer Date: 7-31-06
(include your title, if on behalf of company or organization)