

FOR OFFICE USE ONLY

Amt. of Fee \$:

Receipt No.

Receipt By:

Date Received:

RECEIVED

JAN 13 2006

DEPARTMENT OF
WATER RESOURCES

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 user(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. 29-13699 Telephone No. (208) 524-7500
2. Name of Permit Holder(s): United States of America
3. Mailing Address: US Department of Agriculture, Forest Service, 1405 Hollipark Drive
City Idaho Falls State Idaho Zip 83401
4. Source of Water: Well - Groundwater If **GROUNDWATER** (well), Date Drilled: mo. 08 / yr. 2002
Well Driller: Mountain West Well Drilling Drilling Permit Number: 772191 (Well Driller's Report)
7772191 (Application for Permit)
5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): Public Campground Stockwater (No. and type of stock): _____
(Summit Campground)
Irrigation (No. of acres): _____ Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: 0.04 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 X
Has the measuring device been installed? Yes X or No _____
Though not required, a measuring device was installed.
8. Fee Enclosed: \$0.00 - GW < 0.04 cfs (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 Birch or Dave Sleight Telephone Number: (208) 236-7500
Address: Westside Ranger District, 4350 Cliffs Drive, Pocatello, Idaho 83204
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: Lay Trenchel FOREST SUPERVISOR Date: 1-11-06
(include your title, if on behalf of company or organization)