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JUL 10 2006

DEPARTMENT OF
WATER RESOURCES

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JUN 30 2006

IDWR/North

Idaho Department of Water Resources
PO Box 83720
Boise, Idaho 83720-0098

Re: Permit #97-7408
George & Elin Weaver

May 27, 2006

Please find the attached "Proof Acknowledgement Letter" dated May 12, 2006. The discrepancy of maximum diversion rate is my clerical error. Our stream allows a maximum diversion rate of 0.20 cfs. My claim of 0.02 cfs is in error. I have attached the corrected document, initialed and signed.

Thank you for locating my error and correcting it.

Sincerely,



George & Elin Weaver
615 Freeman Lake Rd.
Oldtown, Idaho 83822
208-437-4991 Phone/Fax



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, ID 83720-0098

Phone: (208) 287-4800 Fax: (208) 287-6700 Web Site: www.idwr.idaho.gov

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

May 12, 2006

GEORGE AND ELIN WEAVER
615 FREEMAN LAKE RD
OLDTOWN ID 83822

PROOF ACKNOWLEDGMENT LETTER

RE: PERMIT NO. 97-7408

RECEIVED
JUN 30 2006
IDWR/North

Dear Permit Holder:

The department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the department to conduct a field examination to determine and confirm the use being made of the water, and that it meets the permitted beneficial use.

During my review of the proof you filed, I see you claimed 0.02 cfs as the maximum diversion rate for this permit. However, the department issued the permit with a maximum diversion rate of 0.20 cfs. The department will rely on the field examination to clarify this discrepancy.

Be advised that Section 42-248, Idaho Code requires you or the owner of this water right to maintain current ownership and address records on file with the department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any department office.

If you have any questions or wish to clarify this discrepancy, please contact the **Northern** Regional Office of the department at (208) 769-1450.

Sincerely,

Christine Roberts
Technical Records Specialist
IDWR State Office

Encl.

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

RECEIVED
2005
Department of Water Resources

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) 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. 97-7408 Telephone No. 208-437-4991
2. Name of Permit Holder(s): GEORGE F KLIN WEAVER
3. Mailing Address: 1215 FREEMAN LAKE RD
City OLDTOWN State ID Zip 83822
4. Source of Water: LITTLE ALBERT CREEK If GROUNDWATER (well), Date Drilled: mo. 7 / yr. 2005
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): 40 COWS / HORSES
Irrigation (No. of acres): 5 Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: 0.02 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 _____ or No X
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: GEORGE WEAVER Telephone Number: 208-437-4991
Address: 1215 FREEMAN LAKE RD OLDTOWN ID 83822
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: George Weaver Date: 10/20/05
(include your title, if on behalf of company or organization)

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Idaho Department of Water Resources Receipt

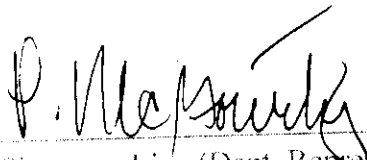
Receipt ID C079492

Payment Amount \$50.00 Date Received 10/31/2005 11:20:01 AM Region State Status
Payment Type Check Check Number 4046

Payer ALPHA & OMEGA CONSTRUCTION
Comment BENEFCIAL USE 0229 21 56104 1155

Fee Detail

Amount	Description	Fund	FD	PCA	SO
\$50.00	BENEFCIAL USE	0229	21	56104	1155



Signature Line (Dept. Representative)