

Amt. of Fee \$:
Receipt No. C081073
Receipt By: CB
Date Received: 4/17/06

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

APR 27 2006

PROOF OF BENEFICIAL USE

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. 97-07456 Telephone No. (714) 777-3609
2. Name of Permit Holder(s): NANCY GILLET
3. Mailing Address: 4540 DORINDA
City YORBA LINDA State CA Zip 92887
4. Source of Water: LEE SOLDADO 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): _____ Stockwater (No. and type of stock): 10 HEAD (MIXED)
Irrigation (No. of acres): _____ Other: WILDLIFE & RECREATION STORAGE
6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs OR 15.0 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: GARY LAMMERS Telephone Number: (208) 443-2533
Address: P.O. BOX 167, COOLIN, IDAHO 83821
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: Nancy Gillet By Gary Lammers Date: 4/18/06
(include your title, if on behalf of company or organization)
POA