



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

January 10, 2006

JACK JONES
KATHY JONES
125 SOUTH 21ST ST
PAYETTE ID 83661

RE: PERMIT NO. 67-14618

Dear Mr. or Mrs. Jones:

Enclosed is the original Proof of Beneficial Use form ("proof") you filed with the Department on December 27, 2005. I am returning this document to you because the department cannot accept it without the appropriate license exam fee, or a Beneficial Use Field Report from a certified water right examiner. (This fee is specifically for the preparation of a Beneficial Use Field Report prepared by a department examiner, and is the final step before issuance of a license.) The only time a fee is waived for a proof is if the rate of diversion is 0.04 cubic feet per second ("cfs") or less for a ground water right. You were permitted for a surface water source (spring) for a diversion rate of 0.04 cfs. Therefore, your fee would be \$50.00. Please see the enclosed fee schedule.

Please return the enclosed proof form along with your check for \$50.00, to my attention on or before **December 1, 2006** to avoid lapsing of this water right. If you have any questions regarding filing the proof, please contact me at (208) 287-4942, or contact the regional office in Boise at (208) 334-2190.

Sincerely,

A handwritten signature in black ink that reads "Deborah J. Gibson". The signature is fluid and cursive, with the first name being the most prominent.

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Enclosure

FOR OFFICE USE ONLY
Amt. of Fee \$: _____
Receipt No. _____
Receipt By: _____
Date Received: _____

No. 1

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

RECEIVED

DEC 27 2005

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. 67-14618 Telephone No. 208-642-3194
2. Name of Permit Holder(s): Jack Jones And/or Kathy Jones
3. Mailing Address: 125 South 21st Street
City Payette State Id Zip 83661
4. Source of Water: Unnamed Stream 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): _____
Irrigation (No. of acres): 2 Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: 0.04CFS 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 <u>✓</u> |
| | Has the measuring device been installed? | Yes _____ | or | No <u>✓</u> |
8. Fee Enclosed: \$ already submitted (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: Jack Jones Telephone Number: 208-642-3194
Address: same as above
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: Jack Jones and/or Kathy Jones Date: 12/24/05
(include your title, if on behalf of company or organization)