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FOR OFFICE USE ONLY

Amt. of Fee \$:

Receipt No.:

Receipt By:

Date Received:

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

OCT 31 2001

PROOF OF BENEFICIAL USE

Department of Water Resources
Southern Region

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. 37 - 8670 Telephone No. 206 - 448 - 9501

2. Name of Permit Holder(s): BENJAMIN S. CROCKER TRUST D et. al.

3. Mailing Address: 87 VIRGINIA #12

City SEATTLE State WA Zip 98101

4. Source of Water: GROUNDWATER FROM SPRINGS If GROUNDWATER (well), Date Drilled: mo. N/A / yr.

Well Driller: N/A Drilling Permit Number: N/A

5. Use(s) (as authorized by the water right permit):

Domestic (No. of households): Stockwater (No. and type of stock):

Irrigation (No. of acres): Other: HEATING, RECREATION, WILDLIFE (4.0 cfs)

6. Total rate of diversion and/or volume for which proof is submitted: 0.212 cfs OR N/A 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 X or No

Has the measuring device been installed?

Yes or No X

8. Fee Enclosed: \$ N/A EXAM SUBMITTED WITH FORM (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: N/A - FIELD EXAM COMPLETED BY BROCKWAY ENGR 10/29/01 Telephone Number:

Address:

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: Helen Ann Crocker Fee Date: 9/14/01
(include your title, if on behalf of company or organization)