

Amt. of Fee \$: _____
Receipt No. _____
Receipt By: _____
Date Received: _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

JUL 18 2005

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 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. 65-22805 Telephone No. 208-634-3237
 2. Name of Permit Holder(s): Faustino Ramos
 3. Mailing Address: PO Box 1543
City McCall State ID Zip 83638
 4. Source of Water: ground water If **GROUNDWATER** (well), Date Drilled: mo. 05 / yr. 2003
Well Driller: JRU Drilling Drilling Permit Number: see attached Well Driller's Report
 5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): one Stockwater (No. and type of stock): _____
Irrigation (No. of acres): _____ Other: diversion to storage/aesthetic storage
 6. Total rate of diversion and/or volume for which proof is submitted: 0.04 cfs OR 3.0 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 <u>✓</u>
	Has the measuring device been installed?	Yes _____ or No <u>✓</u>
 8. Fee Enclosed: \$ 00.00 (not req'd) (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: Faustino Ramos Telephone Number: 208-634-3237
Address: PO Box 1543, McCall, ID 83638
 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: Faustino Ramos Date: 7/11/05
(include your title, if on behalf of company or organization)