

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

PROOF OF BENEFICIAL USE

AUG 12 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. 61-12060 Telephone No. 208-366-2973 home
208-587-9091 work.
2. Name of Permit Holder(s): JOANNE MARTINEZ
3. Mailing Address: P.O. Box 184 (AKA: 206 N. ALTON, Glens Ferry) per tel. call
City Glenns Ferry State ID Zip 83623 8/18/05 - dg
4. Source of Water: Little Canyon 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): _____
Irrigation (No. of acres): 0.5 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?
Has the measuring device been installed?

Yes _____ or No X
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: JOANNE MARTINEZ Telephone Number: 208-587-9091 work.
Address: P.O. Box 184 Glenns Ferry ID 83623

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: Joanne Martinez Date: 8/11/05
(include your title, if on behalf of company or organization)