

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
322 East Front Street, P.O. Box 83720
Boise, Idaho 83720-0098

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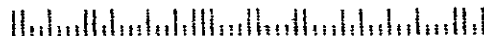
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DEPARTMENT OF
WATER RESOURCES

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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

February 8, 2006

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

GLEN SYLTE
6444 W DIAGONAL RD
RATHDRUM ID 83858

PROOF ACKNOWLEDGMENT LETTER

Re: Permit No. 95-9194

Dear Permit Holders:

The department acknowledges receipt of the proof of beneficial use ("proof") form submitted for the above-referenced permit. The next step in the process of developing a water right is for the department to conduct the field examination to determine and confirm the use of the water, and that it meets the permitted beneficial use.

Be advised that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any department office, or at the department's website at: www.idwr.idaho.gov

If you have questions about the field examination, please contact the **Northern** Regional Office of the department in Coeur d'Alene at (208) 769-1450.

Sincerely,

A handwritten signature in black ink that reads "Deborah J. Gibson". The signature is written in a cursive, flowing style.

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Encl.

RECEIVED

SEP 21 2004

DEPARTMENT OF
WATER RESOURCES

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 50
Receipt No. 101652
Receipt By: AS
Date Received: 09-17-04

RECEIVED

SEP 17 2004

IDWR/North

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. 95-9194 Telephone No. 687-1183

2. Name of Permit Holder(s): GLEN SYLTE

3. Mailing Address: 6444 W. DIAGONAL RD
City RATHBURN State ID Zip 83858

4. Source of Water: BROWNATION 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): 1 Stockwater (No. and type of stock): _____

Irrigation (No. of acres): 10 Other: _____

6. Total rate of diversion and/or volume for which proof is submitted: 12 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 _____
Yes _____ or No _____

8. Fee Enclosed: \$ 50- (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: SAME AS ABOVE 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: Glen A Sylte Date: 09-17-04
(include your title, if on behalf of company or organization)