

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
PROOF OF BENEFICIAL USE

RECEIVED

MAR 25 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. 37-8906 Telephone No. 208-726-5942
2. Name of Permit Holder(s): HULEN MEADOWS WATER COMPANY
3. Mailing Address: PO Box 2223
City Ketchum State ID Zip 83340
4. Source of Water: GROUND If **GROUNDWATER** (well), Date Drilled: mo. _____ / yr. _____
Well Driller: Rosale Walker Drilling Permit Number: _____
→ SEE COPIES OF DRILLER'S REPORT
5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): 4 Stockwater (No. and type of stock): _____
Irrigation (No. of acres): _____ Other: 4 HOMES w/ 1/2 ir. &c.
6. Total rate of diversion and/or volume for which proof is submitted: 1.16 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: MATIL LONGLEY Telephone Number: 208-726-5942
Address: PO. Box 236, Ketchum, ID 83340

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: MM - MANAGER Date: 3-22-05
(include your title, if on behalf of company or organization)