

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. 2077196
Receipt By: ML
Date Received: 3-18-05
RECEIVED
MAR 18 2005
DEPARTMENT OF
WATER RESOURCES

STATE OF IDAHO
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. 22-07536 Telephone No. (208) 354-2802
2. Name of Permit Holder(s): Bob Bagley (original permit in Bagley's name - needs to be in EE-DAH-HOW Homeowner's name now)
3. Mailing Address: P.O. Box 281 (This is address for Susan Hayes - Pres. Homeowner's now.)
City Driggs State ID Zip 83422
4. Source of Water: Groundwater If **GROUNDWATER** (well), Date Drilled: mo. 10 / yr. 90
Well Driller: Denning Drilling Drilling Permit Number: Unknown
5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): 20 (originally applied for) Stockwater (No. and type of stock): _____
Irrigation (No. of acres): _____ Other: _____
6. Total rate of diversion and/or volume for which proof is submitted: .15 (originally applied for) 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? Yes _____ or No X
Has the measuring device been installed? Yes _____ or No _____
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: Susan Hayes Telephone Number: 354-2802
Address: P.O. Box 281 / 63 Grandview Dr. - Driggs - ID 83422
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: Susan Hayes EE-DAH-HOW Homeowner's Assoc. President Date: 3-10-05
(include your title, if on behalf of company or organization)