

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

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JUN 02 2004

PROOF OF BENEFICIAL USE

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 who has been appointed by the department.

1. Permit No. 63-12596 Telephone No. (208) 342-4224

2. Name(s) of Permit Holder(s): Crane Creek Country Club

3. Mailing Address: 500 West Curling Drive, Boise, Idaho 83702

4. Source of Water: Ground water If GROUNDWATER (well), Date Drilled: mo. 8 /yr. 1964

mo. 9 /yr. 1994

mo. 11 /yr. 1994

a. Well Driller: Lukehart Drilling & Pump Co. Drilling Permit Number: 63- 94 - W - 0897 - 000

Wayne Stevens Drilling 63 - 94 - W - 0897 - 000

Riverside, Inc. 63 - 94 - W - 0975 - 000

Unknown ? - ? - ? - ?

b. OPTIONAL:

Pump Horsepower: 100 / 20 / 60 Pressure (psi): 0 Dynamic pumping level (ft) 202 / 95 / 235

5. Use(s) (as authorized by the water right permit):

Irrigation (no. of acres): 116 Other: _____

6. Total rate of diversion and / or volume for which proof is submitted: 5.52 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 Devices: Are measuring devices required? Yes X or No _____

Has the measuring device been installed? Yes X or No _____

Flow Measurement Port: Is a flow measurement port required? Yes X or No _____

Has the measurement port been installed? Yes X or No _____

8. Fee Enclosed: \$ none (See Fee Schedule on back of the instructions for the filing proof of beneficial use)

9. Person to contact to accompany the Department representative during field examination of the water system.

Name: Exam conducted by E. Squires - CWRE # 05-125 Telephone Number: 342-8369

10. The information given on this form is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the State of Idaho.

Signature of permit holder: E. Squires Date: May 18, 2004

(Ed Squires, President of Hydro Logic, Inc. and consultant to Crane Creek Country Club)