

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

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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.

1. Permit No. 37-08195 Telephone No. (208) 726-7825

2. Name of Permit Holder(s): CITY OF KETCHUM

3. Mailing Address: P.O. Box 2315

City KETCHUM State IDA Zip 83340

4. Source of Water: GROUNDWATER If GROUNDWATER (well), Date Drilled: mo. 09 / yr. 1986

Well Driller: WALKER WATER SYSTEMS Drilling Permit Number: N/A

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

Domestic (No. of households): _____ Stockwater (No. and type of stock): _____

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

6. Total rate of diversion and/or volume for which proof is submitted: 2.75 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: \$ 150.00 (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: STEVE HANSEN Telephone Number: (208) 726-7825

Address: P.O. Box 2315 KETCHUM, IDAHO 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: Steve Hansen UTILITIES MANAGER Date: 7-1-04
(include your title, if on behalf of company or organization)