

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.-
 Receipt No. 5040189
 Received By SG
 Date Received 4/24/2024

RECEIVED

APR 24 2024

STATE OF IDAHO
 DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
 FOR SUBMITTING PROOF OF BENEFICIAL USE

DEPT. OF WATER RESOURCES
SOUTHERN REGION

The Idaho Department of Water Resources (Department) considers this form a statement that the permit holder(s) applied water to beneficial use and completed development of a water right to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner (CWRE).** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, complete a Notice of Change in Water Right Ownership form. If you wish to relinquish your permit because you have not established the authorized water use and are not applying for an extension, please notify the Department in writing.

1. Permit No. 02-10633 Name of Permit Holder(s) Theresa Pollard
 Telephone No. (208) 644-0564 Email faithin12day@gmail.com
 Mailing Address 4732 River Rd City Buhl State ID Zip 83316-5103
2. Source of Water Snake River If Ground Water (well), Date Drilled mo. ____ / yr. ____
 Drilling Permit/Tag No. ____ Drilling Company's Name ____
3. Extent of use(s) completed as authorized by the water right permit:
 Domestic (No. households) 1 Irrigation (No. acres) 0.5 Stockwater (No. and stock type) ____
 Other 1/2 acre irrigation is in connection with domestic use.
4. Total diversion rate or volume (storage only) for which proof is submitted 0.04 cfs OR ____ af
If the total developed water use is 5 acres of irrigation or less, is stockwater storage of 14.6 acre-feet or less, or has a diversion rate of less than 0.24 cfs, attach a map of the place of use and point of diversion and photographs showing beneficial use.
5. Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)

6. Permit condition compliance. Refer to the permit approval conditions and check all the items required, then check "Yes" or "No" to indicate whether the required items were established, submitted, and/or installed:

Required? Yes No (If "Yes", attach required data, evidence of compliance, or evidence of installation)

- ☐ ☐ ☒ Ground water level data, pumping information, or other diversion data
☐ ☐ ☒ Mitigation plan
☐ ☐ ☒ Lockable controlling works
☐ ☐ ☒ Measuring device
☐ ☐ ☒ Fish screen
☐ ☐ ☒ Other requirements of the water right permit ____
☐ ☒ Reasonably Anticipated Future Needs ("RAFN") Municipal use
 If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No

7. Fee Enclosed \$ 50.- or ☐ CWRE field report attached or ☐ No fee required
See fee schedule on page 3 of the instructions. Proof statements filed without an appropriate fee are incomplete.

8. Person to contact to accompany a Department representative during the field examination of the water system:

Name: Theresa Pollard Telephone No. 644-0564 Email faithin12day@gmail.com
 Mailing Address 4732 River Rd City Buhl State ID Zip 83316

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 and applied to beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Theresa Pollard

SIGNATURE OF PERMIT HOLDER*

Theresa Pollard

PRINTED NAME AND TITLE

4/23/24

DATE

*Attach power of attorney if completing on behalf of permit holder.

Idaho Department of Water Resources Receipt

Receipt ID: S040189

Payment Amount	\$50.00	Date Received	4/24/2024	Region	SOUTHERN
Payment Type	Check	Check Number	3484		
Payer	POLLARD, THERESA M				
Comments	PROOF OF BENEFICIAL USE: 02-10633 IN THE NAME OF: THERESA POLLARD.				

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$50.00	BENEFICIAL USE	64104	0229	21		1155



Signature Line (Department Representative)