

RECEIVED

Dec 20, 2023

6/22

DEPARTMENT OF
WATER RESOURCES

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

FOR OFFICE USE ONLY

Amt. of Fee \$ _____

Receipt No. _____

Received By _____

Date Received _____

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.

- Permit No. 63-33401 Name of Permit Holder(s) Layne and/or Lori Thornton
Telephone No. 208-631-6998 Email laynedt@aol.com
Mailing Address 3224 Swan Falls Rd City Kuna State ID Zip 83634
- Source of Water Ground Water If Ground Water (well), Date Drilled mo. _____ / yr. _____
Drilling Permit/Tag No. _____ Drilling Company's Name see BUFE
- Extent of use(s) completed as authorized by the water right permit:
Domestic (No. households) _____ Irrigation (No. acres) 106 Stockwater (No. and stock type) _____
Other _____
- Total diversion rate or volume (storage only) for which proof is submitted 0.84 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.
- Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)
Wells, pumps, pressurized system

- 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 <u>diversion & water level measurements, conduit pipe</u> |
| | ☒ | Reasonably Anticipated Future Needs ("RAFN") Municipal use |
- If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No

- Fee Enclosed \$ _____ 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.

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

Name: n/a Telephone No. _____ Email _____
Mailing Address _____ City _____ State _____ Zip _____

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.

SIGNATURE OF PERMIT HOLDER*

PRINTED NAME AND TITLE

DATE

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



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTIER
Governor

GARY SPACKMAN
Director

August 27, 2019

SPF WATER ENGINEERING LLC
C/O SCOTT KING
300 E MALLARD DR STE 350
BOISE ID 83706-6660

PROOF DEFICIENCY LETTER

RE: Permit No. 63-33401

Dear Permit Holder(s):

The Department received the proof of beneficial use (proof) form you submitted for the above referenced permit.

I am returning the form to you because information provided is incomplete. Please address the following items on the form:

- Item no. 7 of the proof form indicates that a measuring device is installed, however permit condition no. 16 of this permit states:

"...A report with no less than 4 years of diversion measurement and aquifer level water monitoring data shall be submitted in connection with filing proof of beneficial use. Submittal of a proof of beneficial use statement without the required report will not be accepted by the Department and may result in cancellation of the permit."

I recommend that condition No. 16 of this permit be complied with immediately. Enclosed is a copy of this permit for your reference.

Please resubmit the proof form and the additional information required under this permit. I will hold this matter for (15) days from the date of this letter. If the Department does not receive all of the information required under this permit in connection with filing proof of beneficial use, the Department may be forced to cancel your permit.

If you have any questions concerning this matter, please contact me at (208) 287-4945.

Sincerely,

Darla Block
Technical Records Specialist

Enclosure(s)

c: LAYNE THORNTON AND/OR LORI THORNTON (without enclosures)