



IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098
Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

April 10, 2025

JUSTIN MURPHY
CRISSA MURPHY
807 N FORK SANTA CREEK RD
SAINT MARIES ID 83861-9541

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 92-11089

Dear Permit Holder(s):

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

Please be advised that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at www.idwr.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Julie Adams
Technical Records Specialist

Enclosure(s)

RECEIVED

JUN 03 2024

IDWR / NORTH

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

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.00Receipt No. N044728Received By YMBDate Received 6/3/24

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. 92-11089 Name of Permit Holder(s) Justin and/or Crissa Murphy

Telephone No. 208-210-6196 Email justinandcrissa@gmail.com

Mailing Address 807 N. Fork Santa Creek Rd City St. Maries State ID Zip 83861

2. Source of Water Unnamed Stream 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) 2 Irrigation (No. acres) 1 Stockwater (No. and stock type) 10/heads? Pigs

Other stock type is a mixed herd

4. Total diversion rate or volume (storage only) for which proof is submitted 0.11 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.)

water is collected from snow melt into a pond 30' x 25' x 4' D for each diversion site. water is then pumped using portable pumps into storage containers at POC

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 \$ 50.00 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: Justin Murphy Telephone No. 208-582-0439 Email justinandcrissa@gmail.com

Mailing Address 807 N. Fork Santa Creek Rd City St. Maries State ID Zip 83861

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.

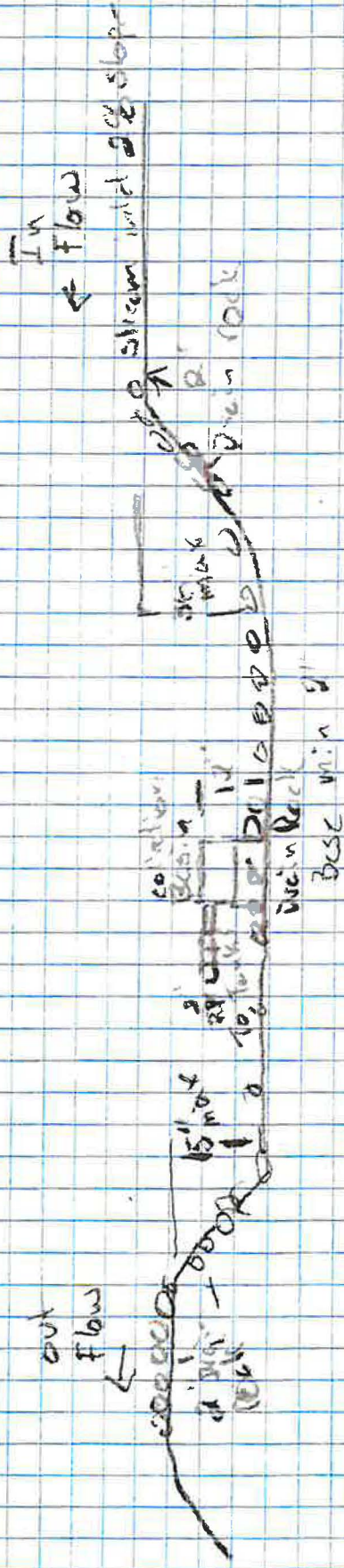
SIGNATURE OF PERMIT HOLDER*

Justin M. Murphy / owner
PRINTED NAME AND TITLE

6-3-2024
DATE

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

collect or pump up to basins
 which redirect flow/basins which
 go directly to water storage. Storage must
 not have sump to avoid bacteria transfer



no more than 3' from top of basin to
 sump out flow finish grade