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JAN 07 2025

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

FOR OFFICE USE ONLY	
Amt. of Fee \$	50.00
Receipt No.	211974
Received By	KM
Date Received	1.2.25

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 an Assignment of Permit 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. 96-16701 Name of Permit Holder(s) Airiamia McMahon
Telephone No. 208-920-0912 Email audigirl9@verizon.net
Mailing Address 1427 Peninsula Rd City Hope State ID Zip 83836
- Source of Water Lake Pend Oreille If Ground Water (well), Date Drilled mo. ____ / yr. ____
Drilling Permit/Tag No. ____ Drilling Company's Name ____
- Extent of use(s) completed as authorized by the water right permit:
Domestic (No. households) ____ Irrigation (No. acres) 3.7 Stockwater (No. and stock type) ____
Other ____
- Total diversion rate or volume (storage only) for which proof is submitted .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.
- Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)
Draw in from intake hose located under dock, to pump located in box along side dock - auto pumps water into a 12 section inground irrigation sprinkler system for lawn + garden.
- 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
- 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.
- Person to contact to accompany a Department representative during the field examination of the water system:
Name: Airiamia McMahon Telephone No 208-920-0912 Email audigirl9@verizon.net
Mailing Address 1427 Peninsula Rd City Hope State ID Zip 83836

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.

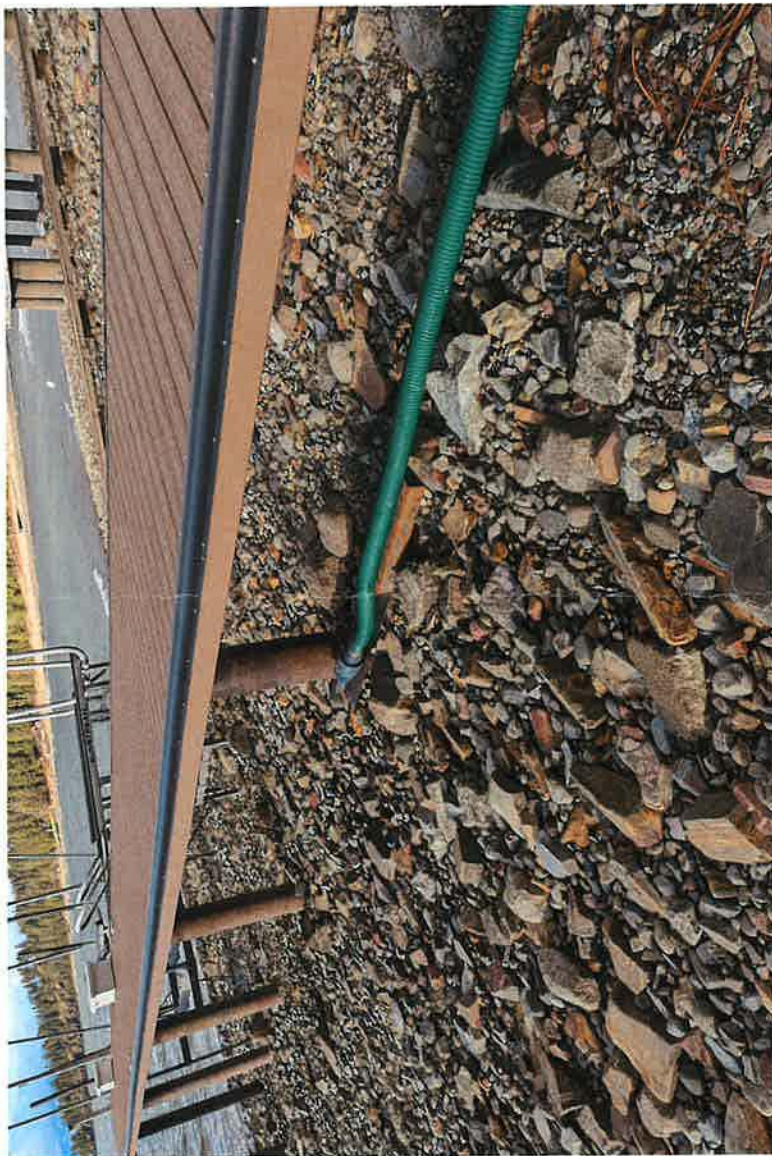
Airiamia McMahon 12-19-24
SIGNATURE OF PERMIT HOLDER* PRINTED NAME AND TITLE DATE

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

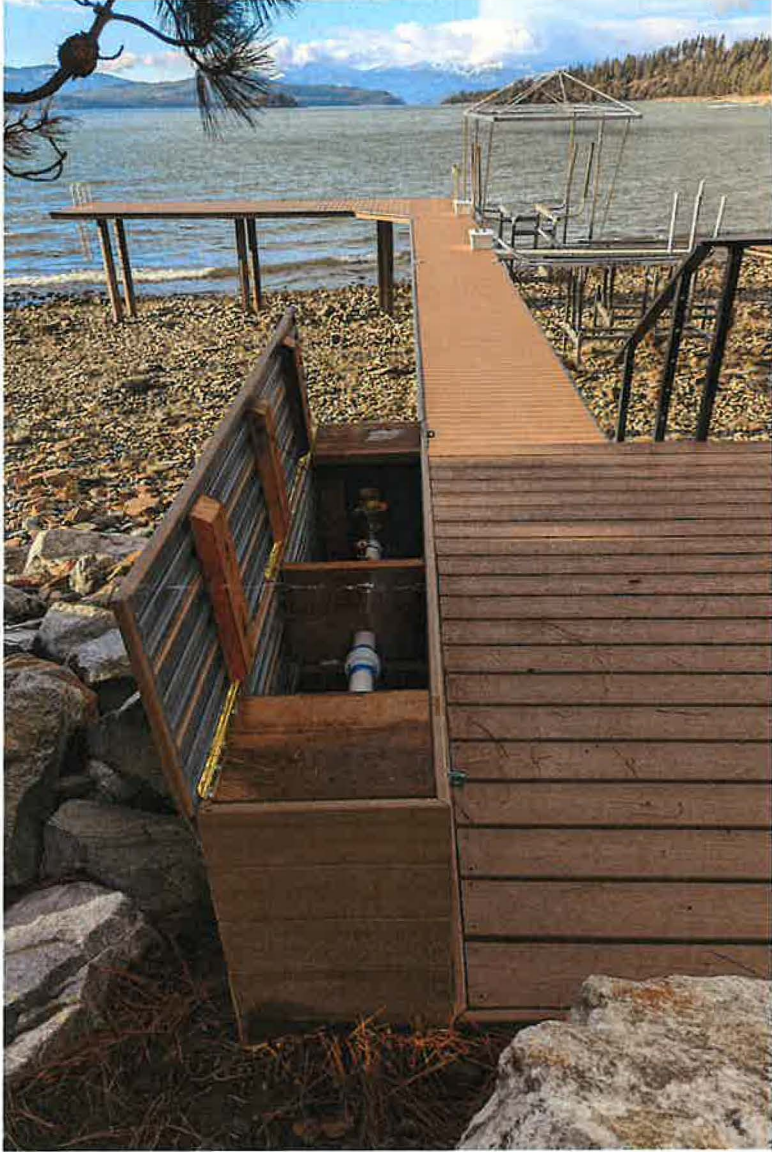
Fish Screen



Intake Hose



Pump & Shelter



Pump



ATTORNEY AT LAW
JAMES THEODORE DIEHL
106 WEST SUPERIOR STREET
SANDPOINT, IDAHO 83864
(208) 263-8629
FAX 263-8983

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DEPT. OF WATER RESOURCES

December 30, 2024

Idaho Dept. of Water Resources
PO Box 83720
Boise, ID 83720-0098

Re: Permit No. 96-16701

Dear IDWR:

Enclosed please find the following for your review:

1. Statement of Completion including pictures.
2. Check No. 17634 in the sum of \$50.00 to cover your filing fees.

Please note the mailing address for Ms. McMahon has changed since the initial filing of the Application. If you have any questions or need anything further, please contact our office.

Very truly yours,



Dana L. Anderson
Legal Assistant

Enclosures