



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

May 02, 2025

TY NUFFER
3816 WAYAN LOOP
WAYAN ID 83285

PROOF DEFICIENCY LETTER

RE: Permit No. 25-14477

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 on the application is not sufficient or incomplete. Please address the following item on the form:

- Pursuant to Idaho Code § 42-217(1)(a) the name of the permit holder(s) shall be included on the proof. Please resubmit the proof with the name of the permit holder(s).

A \$50.00 license examination fee was not submitted with the proof form. This permit authorizes a diversion rate of 0.04 cfs (cubic feet per second) of ground water for stockwater use and was stated the same on the form requiring a license examination fee of \$50.00.

Please resubmit the completed form and the required fee at your earliest convenience no later than June 9, 2025 to avoid additional fees. The priority date of your permit will be advanced one day for each day past the proof of beneficial use due date. If you have any questions concerning this matter, please contact me at (208) 287-4945.

Sincerely,

Julie Adams

Julie Adams
Technical Records Specialist 1

Enclosure(s)

Form 42-217 Rev. 6/02
RECEIVED
Incomplete
APR 28 2025
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.

1. Permit No. 25-14477 Name of Permit Holder(s) _____
Telephone No. (208) 574-2244 Email _____
Mailing Address 3816 Wayan Loop W City Wayan State ID Zip 83285

2. Source of Water Ground Water well If Ground Water (well), Date Drilled mo. 08 / yr. 03
Drilling Permit/Tag No. D0021764 Drilling Company's Name Ray Nelson Drilling

3. Extent of use(s) completed as authorized by the water right permit:
Domestic (No. households) _____ Irrigation (No. acres) _____ Stockwater (No. and stock type) 20 Bovine 10 Equine
Other _____

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

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 \$ _____ 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: Ty Nuffer Telephone No. (208) 574-2244 Email Nuffbaschell@yahoo.com
Mailing Address 3816 Wayan Loop W City Wayan State ID Zip 83285

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.

Ty Nuffer Ty Nuffer 4/14/25
SIGNATURE OF PERMIT HOLDER* PRINTED NAME AND TITLE DATE

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