

RECEIVED

FEB 21 2025

RECEIVED

FEB 25 2025

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

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.00
Receipt No. N045237
Received By WMB
Date Received 2/21/25

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 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. 97-9842 Name of Permit Holder(s) William M Cortright Revocable Trust

Telephone No. 208-217-5917 Email bcort430@gmail.com

Mailing Address 430 Bear Gulch Rd City Priest River State ID Zip 83856-6081

2. Source of Water SPRING If Ground Water (well), Date Drilled mo. N/A / yr.

Drilling Permit/Tag No. N/A Drilling Company's Name N/A

3. Extent of use(s) completed as authorized by the water right permit:

Domestic (No. households) 1 Irrigation (No. acres) 1/2 Stockwater (No. and stock type) N/A

Other Permit was filed on an existing system; prior Claim was disallowed in the CFPRBA.

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.)

Spring water captured by poly-pipe which runs underground until it hits my storage tank prior to distribution to home for use.

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 N/A

☐ ☒ 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: William "Bill" Cortright Telephone No. 208-217-5917 Email bcort430@gmail.com

Mailing Address 430 Bear Gulch Rd City Priest River State ID Zip 83856-6081

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.

W M Cortright
SIGNATURE OF PERMIT HOLDER*

W M Cortright
PRINTED NAME AND TITLE

2-18-25
DATE

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

Idaho Department of Water Resources
Attn Luke Bates
Feb, 18, 2025

RECEIVED
FEB 21 2025

IDWR / NORTH

RECEIVED
FEB 27 2025
DEPT. OF WATER RESOURCES

To: Luke Bates
Sr Water Resource Agent
Northern Regional Office
Coeur d'Alene Id

02/18/2025

Dear Mr. Bates,

I am returning the completed "Statement of Completion" form # 42-217, It is signed by me and along with the \$50.00 filing fee.

Because of my lack of mobility, I ask if you would please notify me as to what day and time you or agent will be here to inspect my water source, so that I can arrange for someone to help me show you around,

Thank you for your time and efforts, I appreciate it very much.

Sincerely

Bill Cortright

208 217-5917

bcort430@gmail.com