

RECEIVED

MAY 09 2025

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

FOR OFFICE USE ONLY	
Amt. of Fee \$	<u>50</u>
Receipt No.	<u>C121153</u>
Received By	<u>KM</u>
Date Received	<u>5.9.25</u>

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. 86-12176 Name of Permit Holder(s) Tim & Debra Jeffords
Telephone No. 208-413-1855 Email Debbie-Jeffords@hotmail.com
Mailing Address 1057 Claypit Rd City Troy State ID Zip 83871
- Source of Water Well If Ground Water (well), Date Drilled mo. 7 /yr. 1999
Drilling Permit/Tag No. DOO10239 Drilling Company's Name McPherson & Wright Drilling
- Extent of use(s) completed **as authorized by the water right permit:**
Domestic (No. households) 1 Irrigation (No. acres) 5 Stockwater (No. and stock type) _____
Other _____
- Total diversion rate or volume (storage only) for which proof is submitted 0.02 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.)
The pump runs to the Holding Tank then runs to spicket the Run by hose to under ground drip line to irrigate orchard
- 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.

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

Name: Tim Jeffords Telephone No. 208-596-1431 Email TimJeffords@gmail.com
Mailing Address 1057 Claypit Rd City Troy State ID Zip 83871

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.

Tim R. Jeffords Tim R. Jeffords owner 5.5.25
SIGNATURE OF PERMIT HOLDER* PRINTED NAME AND TITLE DATE

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

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DEPT. OF WATER RESOURCES

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT
To appropriate the public waters of the State of Idaho

Ident. No. _____

1. Name of applicant(s) TIM R JEFFORDS & DEBRA E JEFFORDS Phone (208) 596-1473
Name connector (check one): ☒ and ☐ or ☐ and/or
Mailing address 1057 CLAYPIT RD City TROY
State ID ZIP 83871 Email TIMRJEFFORDS@GMAIL.COM
2. Name of representative, if any _____ Phone _____
Mailing address _____ City _____
State _____ ZIP _____ Email _____
- a. ☐ Send all correspondence for this application to the representative and not to the applicant OR
☐ Send original correspondence to the applicant and copies to the representative.
- b. ☐ The representative may submit information for the applicant but is not authorized to sign for the applicant OR
☐ The representative is authorized to sign for the applicant. Attach a Power of Attorney or other documentation.
3. Source of water supply GROUNDWATER which is a tributary of _____
4. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
40N	03W	28			SW	SW	LATAH	GROUNDWATER	D0010239
								,	

5. Water will be used for the following purposes:
- Amount 0.04 cfs for DOMESTIC purposes from 01/01 to 12/31 (both dates inclusive)
(cfs or acre-feet per year)
- Amount 0.15 cfs for IRRIGATION purposes from 04/01 to 10/31 (both dates inclusive)
(cfs or acre-feet per year)
- Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per year)
- Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per year)
6. Total quantity to be appropriated is (a) 0.19 cubic feet per second (cfs) and/or (b) _____ acre-feet per year (af).
7. Proposed diverting works:
- a. Describe type and size of devices used to divert water from the source. WELL WITH PUMP TO HOME AND IRRIGATION LINES.
- b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet. If the reservoir will be filled more than once each year, describe the refill plan in item 12. For dams 10 feet or more in height AND having a storage capacity of 50 acre-feet or more, submit a separate Application for Construction or Enlargement of a New or Existing Dam. Application required? ☐ Yes ☐ No
- c. Proposed well diameter is 8 inches; proposed depth of well is 405 feet.
- d. Is ground water with a temperature of greater than 85°F being sought? ☐ Yes ☒ No
- e. If well is already drilled, when? 7/14/1999; drilling firm MC PHERSON & WRIGHT DRILLING;
well was drilled for (well owner) TIM JEFFORDS; Drilling Permit No. D0010239

For Department Use

Received by _____ Date _____ Time _____ Preliminary check by _____
Fee \$ _____ Receipted by _____ Receipt No. _____ Date _____

8. Description of proposed uses (if irrigation only, go to item 9):
- Hydropower; show total feet of head and proposed capacity in kW. _____
 - Stockwatering; list number and kind of livestock. _____
 - Municipal; must complete and attach the Municipal Water Right Application Checklist.
 - Domestic; show number of households 1 HOME
 - Other; describe fully. _____

9. Description of place of use:
- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 - If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
40N	03W	28											5						5
													D						

Total number of acres to be irrigated: 5

10. Describe any other water rights used for the same purposes as described above. Include water delivered by a municipality, canal company, or irrigation district. If this application is for domestic purposes, do you intend to use this water, water from another source, or both, to irrigate your lawn, garden, and/or landscaping? N/A

11. a. Who owns the property at the point of diversion? APPLICANT
- b. Who owns the land to be irrigated or place of use? APPLICANT
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: N/A

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. WANT TO OBTAIN A WATER RIGHT FOR MY HOME AND UP TO 5 ACRES OF IRRIGATION FROM MY WELL

13. Time required for completion of works and application of water to proposed beneficial use is 1 years (minimum 1 year).

14. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½" x 11" map or maps clearly identifying the proposed point of diversion, place of use, section #, township & range. The map scale shall not be less than two (2) inches equal to one (1) mile.

The information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.

TIM R JEFFORDS
 Signature of Applicant
 TIM R JEFFORDS
 Print Name (and title, if applicable)

Debra Jeffords
 Signature of Applicant
Debra Jeffords
 Print Name (and title, if applicable)