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Claim Number: 92-7106

Claim Fee: \$25.00

Claimant(s): KATHRYN WOLTER

PO BOX 205

SANTA , ID

83866

JEFFREY WOLTER

PO BOX 205

SANTA , ID

83866

Claimed Purpose(s) of Use: DOMESTIC

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Office address and phone number:

Idaho Department of Water Resources
7600 Mineral Dr. Suite 100