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DEPT. OF WATER RESOURCES

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS**

**IN RE THE GENERAL ADJUDICATION OF RIGHTS TO THE USE OF
WATER FROM THE PALOUSE RIVER BASIN WATER SYSTEM**

CIVIL CASE 59576

NUMBER:

Ident. Number: 87-10339

Date Received: 5-15-2019

Receipt No.: N034495

[Signature]

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
MICHAEL D GRISWOLD	1015 JOYCE RD	MOSCOW	ID	USA	83843-8777

2. Date of Priority:

Date	Explanation
4/22/1977	Completion date on the well log

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
40N	05W	17		NW	NW	LATAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	Parcel No RP01750000008CA

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.070	0.00	0.0

Totals:

CFS	AF	KW
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0.070 0.00

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	40N	05W	17	NW	NW	LATAH	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. Signature(s):

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Palouse River Basin Adjudication." (b.) I/We do ___ do not ___ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s):  Date: 5/15/19
 _____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____
 Title Organization

that I have signed the foregoing document in the space below as

_____ of _____
 Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please print name

ATM. 1501

TELEPHONE A/C 208 743-5623

EARL WITT WELL DRILLINGAIR ROTARY—IRRIGATION AND DOMESTIC WELLS
2019 POWERS AVENUE LEWISTON, IDAHO 83501

MOISED

WELL OWNER Bill Kennan ADDRESS MoscowWORK STARTED 4/20/77 FINISHED 4/22/77TOTAL DEPTH OF WELL 160' STATIC LEVEL 75'GALS. PER MINUTE approx 30 TEMP.SIZE OF HOLE DRILLED 8"CASING AMT. INSTALLED 160' SIZE 8"

ADDITIONAL INFORMATION

STATEMENT

DATE 7/1/77 1977

160' 8" hole 12.00 1920.00
 30' 8" casing 7.00 210.00
 150' 8" P.C. 11.25 1687.50
 Total 10.00 1920.00
 1917.50

FORMATIONS

25'
75'
100'
125'
150'
175'
200'
225'
250'
275'
300'
325'
350'
375'
400'
425'
450'
475'
500'
525'
550'