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Claim Number: 87-11715

Claim Fee: \$25.00

Claimant(s): PHIL OR HEATHER RHEINGANS

PO BOX 8986
MOSCOW , ID
83843
PHIL OR HEATHER RHEINGANS

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MOSCOW , ID
83843
PHIL OR HEATHER RHEINGANS

PO BOX 8986
MOSCOW , ID
83843

Claimed Purpose(s) of Use: DOMESTIC
STOCKWATER

RECEIVED

SEP 06 2019

IDWR / NORTH

Receipt #
N035588
Ja \$25.00
9/6/19

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Office address and phone number:

Idaho Department of Water Resources
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