



12/99

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
RECOMMENDATION OF WATERMASTER

Application No: TC - 34 - 81

Applicant's Name: GRANITE TRUST

Watermaster's Recommendation:

- a) X I do not oppose approval of this application.
- b) I do not oppose approval of this application if it is conditioned as follows: _____

- c) I oppose approval of this application for the following reasons: _____

- d) Additional Comment: _____

Dated this 29 day of JUNE, 2007.

Water District No: 34

Robert W. Shaffer
Watermaster's Signature

Use reverse side of page if you need more space.