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SEP 07 2004

Ryan

12/16/2003

Department of Water Resources
Eastern Region

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Eastern Region
**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 25-10004

LEDA S JONES
3205 CENTRAL AVE
IDAHO FALLS ID 83401
Telephone Number: (208)523-1472

MAIBEN S JONES
3205 CENTRAL AVE
IDAHO FALLS ID 83401
Telephone Number: (208)523-1472

M DUANE JONES
3711 SILVERWOOD CIRCLE
IDAHO FALLS ID 83406
Telephone Number: (208)522-5985

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

 I AGREE with this proposed recommendation: no changes need to be made.

DATE: 8-30-04

SIGNATURE: M.D. Jones

Please print your name: M. Duane Jones

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161