

RM

01/09/2004

**NOTICE OF ERROR
REPLY**

RECEIVED**NOV 08 2004**

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

Department of Water Resources
Eastern Region

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: 25-13413

EARLENE L CRAWFORD
3724 LNS CREEK RD
WAYAN ID-83285

Telephone Number: (208)574-2166 547-2255

JAMES E CRAWFORD
3724 LNS CREEK RD
WAYAN ID-83285

Telephone Number: (208)574-2166 547-2255

181 E 4TH S Soda Springs ID 83276-1616

181 E 4TH S Soda Springs ID 83276-1616

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

Period of Use

111A Total

Total Quantity Appropriated

Acres in Place of Use

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

Period of Use 4/01 to 11/01

Total Quantity Appropriated 2.62 CFS

111A Total should apply to right

25-13413 Separately from Right 25-00265

			A.		A.
NW	NE	23	SE	SW	28
SW	NE	14	SW	SE	4
NE	SW	40	NW	SE	7
SW	SW	3			

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

Refer to Notice of Claim Dtd 1-23-90 Copy Attached

Amended 9-28-00

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

DATE: 10-29-04

SIGNATURE:

James E Crawford

Please print your name:

JAMES E CRAWFORD

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