

RM

01/20/2004

**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: 25-7374

COLTMAN WATER DIST

401 W 133 N

IDAHO FALLS ID 83401

Telephone Number: (208)529-1659

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

disagree place of use

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

Proper boundry lines

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

POU in the wrong place

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

DATE: _____

SIGNATURE: _____

Byron Jensen

Please print your name: _____

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

*fixed
11/15/04
RM*

*Byron Jensen
208-529-1659*