

01/16/2004

**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: 25-7033

COUNTRY LIFE ESTATES WATER USERS ASSN

C/O GENE A SCOTT

10284 N 25TH E

IDAHO FALLS ID 83401

Telephone Number: (208)523-4534

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:

RECEIVED

JAN 07 2005

Department of Water Resources
Eastern Region

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

DATE: 12/28/04

SIGNATURE: Mark L. Scadden

Please print your name: MARK L. SCADDEN

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