

01/08/2004

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: 27-4003**

DOUGLAS P BEAUREGARD  
364 S 2ND E  
SODA SPRINGS ID 83276

ANNA M BEAUREGARD  
364 S 2ND E  
SODA SPRINGS ID 83276

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:

5/31/2005

SIGNATURE:

*[Handwritten Signature]*

Please print your name:

DOUGLAS P BEAUREGARD

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

RECEIVED  
JUN 13 2005

Department of Water Resources  
Eastern Region

*KMD  
6/1/3*