

05/09/2005

**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: 22-13063

RICHARD & SUSAN JACOBSEN FAMILY TRUST
C/O HOLDEN, KIDWELL, HAHN & CRAPO
PO BOX 50130
IDAHO FALLS ID 83405
Telephone Number: (208)523-0620

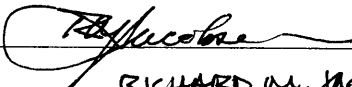
1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

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:

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

DATE: 28 JUNE 05

SIGNATURE: 

Please print your name: RICHARD M. JACOBSEN

TE

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

RECEIVED
JUL 12 2005
Department of Water Resources
Eastern Region

KAW
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